EXHIBIT P

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2 1 2 APPEARANCES: 3 4 THE HARMAN FIRM Attorneys for Plaintiff 5 1776 Broadway New York, New York 10019 6 BY: WALKER HARMAN, ESQ. 7 EDGAR RIVERA, ESQ. 8 NEW YORK CITY LAW DEPARTMENT 9 OFFICE OF THE CORPORATION COUNSEL Attorneys for Defendant 10 100 Church Street New York, New York 10007 11 BY: JOSEPH LOCKINGER, ESQ. 12 13 ALSO PRESENT: 14 Randy Umanzor 15 16 17 18 19 20 21 22 23 24 25 MCM REPORTING SERVICE (516) 775-5209

Case 1:14-cy-09850-VSB Document 58-7 Filed 04/01/16 Page 3 of 148

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IT IS HEREBY STIPULATED AND

AGREED that the filing and sealing of
the within deposition be, and the same
are hereby waived;

IT IS FURTHER STIPULATED AND AGREED that all objections, except as to the form of the question, be and the same are hereby reserved to the time of the trial;

IT IS FURTHER STIPULATED AND
AGREED that the within deposition may
be sworn to before any Notary Public
with the same force and effect as if
sworn to before a Judge of this Court;

 $$\operatorname{IT}$ IS FURTHER STIPULATED that the transcript is to be certified by the reporter.

4 1 2. (One-page document was marked as Plaintiff's Exhibit 1 for 3 4 identification, as of this date.) 5 (A three-page document was 6 marked as Plaintiff's Exhibit 2 for 7 identification, as of this date.) (A four-page document was 9 marked as Plaintiff's Exhibit 3 for 10 identification, as of this date.) 11 (Health Grove document was 12 marked as Plaintiff's Exhibit 4 for 13 identification, as of this date.) (A three-page document was 14 marked as Plaintiff's Exhibit 5 for 15 16 identification, as of this date.) 17 (Complaint was marked as 18 Plaintiff's Exhibit 6 for 19 identification, as of this date.) 20 (Summons was marked as Plaintiff's Exhibit 7 for 21 22 identification, as of this date.) 23 (Answer was marked as 2.4 Plaintiff's Exhibit 8 for 25 identification, as of this date.)

5 1 2. (Verified Bill of Particulars was marked as 3 4 Plaintiff's Exhibit 9 for 5 identification, as of this date.) 6 (Amended Verified Bill of Particulars was marked as 7 Plaintiff's Exhibit 10 for 8 9 identification, as of this date.) 10 (Medical and Physical 11 Fitness Standards and Procedures for Police Officer Candidate was 12 13 marked as Plaintiff's Exhibit 11 14 for identification, as of this 15 date.) 16 (A document Bates stamped D000017 through D000018 was marked 17 18 as Plaintiff's Exhibit 12 for 19 identification, as of this date.) 20 (A document Bates stamped 21 D000019 through D000021 was marked 2.2 as Plaintiff's Exhibit 13 for 23 identification, as of this date.) 2.4 (A document Bates stamped 25 D000022 through D000024 was marked MCM REPORTING SERVICE

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6 1 2. as Plaintiff's Exhibit 14 for 3 identification, as of this date.) 4 (A document Bates stamped 5 D000026 through D000027 was marked 6 as Plaintiff's Exhibit 15 for identification, as of this date.) 7 8 DAVID L I C H T E N S T E I N, called as a 9 witness, having been first duly 10 sworn/affirmed by Margaret M. Harris, a 11 Notary Public within and for the State of 12 New York, was examined and testified as 13 follows: 14 EXAMINATION 15 BY MR. HARMAN: 16 Good morning. 17 Could you please state your name 18 for the record. 19 David Lichtenstein. A 20 Could you spell that, please? 21 L-I-C-H-T-E-N-S-T-E-I-N. Α 2.2 And do you have a middle name? Q 23 Α Ira, I-R-A. 2.4 And have you ever been known by 25 any other name?

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1	Lichte	enstein	7
2	A No.		
3	Q Have you ev	ver been deposed	
4	before?		
5	A Yes.		
6	Q When?		
7	A Most recent	cly within the last	
8	three months.		
9	Q And what wa	as the purpose of that	
10	deposition?		
11	A Representir	ng the Police	
12	Department in a legal matt	er.	
13	Q And then pr	rior to that, we are	
14	going to go over each time	you have been	
15	deposed, so I'm going to d	come back to the most	
16	recent time that you were	deposed.	
17	The time be	efore that, working in	
18	reverse order, when was th	ne second most recent	
19	time that you were deposed	1?	
20	A I would say	y two years ago.	
21	Q What was th	ne purpose of that	
22	deposition?		
23	MR.	LOCKINGER: Objection.	
24	You	can answer.	
25	A It was an e	examination before	

		0
1	Lichtenstein	8
2	trial for a malpractice action.	
3	Q Were you a defendant in that	
4	action?	
5	A I was one of multiple defendants.	
6	Q Prior to the malpractice action?	
7	A I wouldn't have exact knowledge	
8	as to dates and times, but I would estimate at	
9	some time during that same year in a Police	
10	Department issue I was deposed.	
11	Q And then prior to that, we talked	
12	about three withdrawn.	
13	How many times have you been	
14	deposed?	
15	MR. LOCKINGER: Objection.	
16	You can answer.	
17	A I can't give an exact number.	
18	Q Approximate.	
19	A Twenty times.	
20	Q And of those 20, how many	
21	involved the Police Department?	
22	MR. LOCKINGER: Objection.	
23	You can answer.	
24	A I would say 16.	
25	Q So let's talk about the other	

9 Lichtenstein 1 2. four. Tell me about the four times that 3 4 you were deposed that did not involve the Police 5 Department. 6 Once again, I can't say for certainty, but I'll say those were four 7 8 malpractice actions. 9 So tell me about the examination 10 before trial that was two years ago. 11 You were a defendant in an 12 action? 13 Α Yes. 14 Who was the plaintiff? 15 I don't know that I can answer Α 16 that question legally. 17 Is the case filed in court? 0 18 Α Yes. 19 So what would prevent you from 20 answering that question? 21 I believe there might be privacy 2.2 concerns regarding the case. 23 I'm not allowed to discuss until 2.4 the case is adjudicated. 25 MR. HARMAN: Let's go off

10 Lichtenstein 1 2. the record. (Discussion off the record.) 3 4 MR. HARMAN: Back on the 5 record. BY MR. HARMAN: 6 7 Who is the plaintiff in the matter that you were a defendant in that you 8 9 have identified as having an examination before 10 trial two years ago? 11 MR. LOCKINGER: Objection. You can answer. 12 13 Α Greenberg. 14 Greenberg is the last name of the 15 plaintiff? 16 Α Yes. And what's the individual's first 17 0 18 name? 19 I believe it's Irving. A 20 And was there just one plaintiff in the action? 21 22 Α No, there were multiple. 23 How many plaintiffs were in the 2.4 action? 25 A I think six or seven.

11 Lichtenstein 1 2. Where is the action filed? 0 3 Α I believe it's filed in Oueens 4 County. 5 Are you represented by counsel in Q 6 that action? 7 Α Yes. Who is your lawyer or lawyers? 8 9 It's a Long Island firm. I don't 10 remember the name. 11 Did you tender the claim to your 12 malpractice carrier? 13 Α Yes. 14 Who is your malpractice carrier? 15 I believe it's MMIC. Α 16 And is your malpractice carrier 17 paying the defense costs or are you paying the 18 defense costs? 19 Malpractice is paying the defense Α 20 costs. Who are the other defendants? 21 22 Α There's a surgeon who I forget 23 his name, but he's expired. There's a hospital, 2.4 Peninsula Hospital. There's an infectious 25 disease specialist. And I believe there were

12 1 Lichtenstein 2. several other specialists involved. I don't recall the names of the 3 4 doctors. 5 Did you treat Irving Greenberg? 6 It was his wife. His wife is 7 deceased. She was the plaintiff, I guess. 8 0 Did you treat his wife? 9 Α Yes. 10 What's her name? 11 I think it's Elizabeth Greenberg. Α 12 And do you know under what 13 circumstances she passed? 14 MR. LOCKINGER: Objection. 15 You can answer if you can. 16 It's a very old case. It's over Α 17 11 years old. 18 She had had a, possibly a 19 surgical misadventure with her gall bladder and 20 I was taking care of her in the intensive care 21 unit and she died of septic shock. 22 And so are the plaintiffs her Q 23 relatives? 2.4 Her husband. A 25 Q You said there were six or seven.

13 1 Lichtenstein 2 Α I'm sorry, I thought you meant defendants. 3 4 Six or seven defendants and one 5 plaintiff and the plaintiff is the husband of 6 the deceased? 7 Α Yes. And you treated her in the 8 9 intensive care unit? 10 Α Yes. 11 Did you diagnose her with any 12 conditions? 13 MR. LOCKINGER: Objection. 14 Yes. Α 15 What conditions did you diagnose Q her with? 16 17 Adrenal insufficiency, septic 18 shock, those were her two main diagnoses. 19 Are there allegations in the 0 20 lawsuit that you misdiagnosed her? 21 Α Yes. 22 And you say the matter is Q 23 ongoing? 2.4 A Yes. 25 Q It has not been resolved?

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1		Lichtenstein	
2	А	No.	
3	Q	Prior to your EBT in the	
4	Greenberg matt	ter, you testified to approximately	
5	four times tha	at you have been deposed.	
6		Are all of those that didn't	
7	involve the Ne	ew York City Police Department,	
8	correct?		
9	А	Yes.	
10	Q	And of those, do you have	
11	specific recol	lections of those being	
12	malpractice ad	ctions?	
13	А	Yes.	
14	Q	Were you deposed in all of those?	
15	А	Yes.	
16	Q	So let's talk about the second	
17	time that you	were called.	
18		MR. LOCKINGER: Objection.	
19		You can answer.	
20	А	We are going	
21	Q	Back.	
22	А	Backwards.	
23	Q	So you told me about two years	
24	ago in the Gre	eenberg case you appeared for an	
25	EBT.		

15 Lichtenstein 1 2. When was the time prior to that? 3 I'm taking it you have no 4 recollection of being deposed in the last two 5 years? Once again, this is backwards in 6 7 time, so I may have the cases mixed up. 8 I understand and appreciate that. So that the record is clear, you 9 10 are not definite on your memory and I'm only 11 asking you to tell me what you recall. 12 A There was a Mr. London and the 13 allegation was failure to treat high blood 14 pressure. 15 Q And you appeared for an EBT? 16 Yes. Α 17 Was that matter resolved? 0 18 Α Yes. 19 Do you know how it was resolved? 0 20 It was settled. Α Did you make any cash payments as 21 2.2 part of the settlement? 23 Yes. Α 2.4 How about the third time? 0 25 Α I don't remember her last name,

16 1 Lichtenstein 2. but it was, it was a person who had multiple 3 embolic strokes and the allegation was failure 4 to diagnosis endocarditis. 5 What is endocarditis? 6 Endocarditis is an infection of the heart valves. 7 8 Did the patient pass? 0 9 MR. LOCKINGER: Objection. 10 Α Eventually, but not in regard to 11 the --12 The allegation? Q 13 The allegation, yes. Α 14 And was that matter resolved? 0 15 Α Yes. 16 And did you make a cash payment as part of that resolution? 17 18 Α Yes. 19 How about the fourth time? 0 20 The fourth time was, once again, Α 21 I don't remember the plaintiff's name, but it 2.2 was a similar allegation of failure to diagnose 23 endocarditis. 2.4 Is endocarditis a --0 25 Α Endo, E-N-D-O.

17 Lichtenstein 1 2. Is endocarditis, is that a Q 3 specialty of yours? 4 No. It's a disorder that an 5 internist would have to deal with, internal 6 medical person. 7 And did the patient pass? 8 No. Α 9 And was the matter resolved? 10 Α Yes, it was settled. 11 And did you make a cash payment as part of that settlement? 12 13 Α Yes. 14 Where was the action filed? 15 I believe it was filed in either Α 16 Long Island or in Queens County. 17 And how about the third time, the 18 other incident involving the, involving 19 endocarditis? 20 I believe that was filed in 21 Queens County also. 2.2 And approximately when did you 23 provide testimony as part of the third case 2.4 involving multiple embolic strokes? 25 A Well over ten years ago.

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Lichtenstein And how about the fourth incident 0 also involving endocarditis? Similarly 15 years ago, possibly. Now, let's talk about the 16 0 depositions you have given as part of your role in the NYPD. I would like to qualify that statement, because I'm not an attorney. Multiple times I have had to meet with legal counsel, but it wasn't as per subpoena. It would be either a federal matter or it would be a City Council matter. So I don't know if they really

So I don't know if they really all count as what we are doing here today, but I would have to meet with an attorney and at some point I would have to appear in front of a magistrate.

Q I'm going to ask you about sworn testimony. So that could be in front of a magistrate judge, it could be in front of an administrative law judge, in front of a court reporter in a conference room or a court reporter in an office or at the Police Department in front of a court reporter.

1 Lichtenstein

So the idea is that if there is an individual in the room who is typing into a laptop or into a court reporting machine or you are being recorded in some way so that the recording can be transcribed, I'm going to ask you about those instances.

Do you understand?

A Yes.

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Q So is it still your recollection that you have been deposed 16 times as part of your role with NYPD?

A It's more or less. I'm not testifying to an exact number.

Q Would it be easier for you to go in a reverse order or do you just want to tell me about them as you recall them?

A I think it's easier, and, once again, I may omit because of my recollection.

Q I understand.

A At least half of these involved department trials, and a department trial is where a police officer has been charged with an offense, in this case because I, and at that time I was working for the special medicine

20 1 Lichtenstein 2. district, it involved medical fraud or theft of 3 services, and those were in front of an 4 administrative law judge at One Police Plaza. 5 One case involved somebody with 6 cervical spine disease. 7 Could we go back for a second. You said about half involved 8 9 disciplinary trials; is that fair? 10 Yes. Α 11 Q So disciplinary trials. 12 And I take it there were 13 allegations that an employee of the department and/or a police officer, just police officer or 14 15 any employee? 16 Only police officers. Police officers had committed 17 18 some kind of misconduct like medical fraud or 19 theft of services? 20 Α Correct. 21 And you were providing testimony 2.2 on what? 23 MR. LOCKINGER: Objection. 2.4 You can answer.

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On investigations as to whether

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1	Lichtenstein	21
2	their medical claims were factual or fraudulent.	
3	Q Tell me every single instance	
4	that you recall that someone claimed to have a	
5	medical condition and you offered testimony that	
6	they did not. I want to know what the nature of	
7	the condition was and what your position was on	
8	the condition.	
9	MR. LOCKINGER: Objection.	
10	You can answer.	
11	Q To summarize, the bulk were	
12	either alterations in the cervical or lumbar	
13	spine causing disability, and there were one or	
14	two shoulder derangement issues, claims of	
15	disability.	
16	Two officers claimed they had	
17	shoulder disabilities, and I believe the bulk of	
18	the other cases involved either lumbar or	
19	cervical spine disc disease causing disability.	
20	Oh, I'm sorry, and one involved a	
21	hand injury.	
22	Did any of them involve multiple	
23	sclerosis?	
24	A No.	
25	Q Did any one of them involve any	

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1		Lichtenstein
2	neurological o	disorders?
3	А	By extension, the cervical and
4	lumbar and wri	st and shoulder claims all had
5	neuropathy or	an alteration in sensation or
6	motor strength	as part of their claim, yes.
7	Q	How about did any of them involve
8	neurological o	conditions not related to trauma?
9	А	Technically these were all claims
10	of job-induced	d injury, so they were all
11	associated wit	th trauma.
12	Q	And none were not associated with
13	trauma?	
14		MR. LOCKINGER: Objection.
15		You can answer.
16	А	I'm sorry, say that again.
17	Q	They were all associated with
18	trauma?	
19	А	Yes.
20	Q	Let's move on.
21		Tell me about the other eight or
22	so.	
23	А	The other eight, and there could
2 4	have been twic	ce that many
25	Q	Well, you said approximately 16.
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23 1 Lichtenstein 2. Α It could have been 30. I don't 3 have an independent recollection, sir. 4 This has been over 15 years. 5 So you worked --0 6 Α For the Police Department --And you believe it could be 7 anywhere from 16 times to 30 times that you've 8 9 offered testimony? 10 Α Yes. 11 Let's talk about those other 12 instances that you remember that didn't involve 13 providing testimony regarding a disciplinary 14 proceeding related to a medical disability. 15 The majority of those cases were 16 involved with hearing deficiency. 17 There was one case of 18 fibromyalgia. 19 There was a recent seizure 20 disorder where I was deposed. I believe that 21 was the deposition, I think that was the most 2.2 recent deposition I gave. 2.3 Two months ago? 2.4 It's a few months ago or a year 25 ago. Once again, they all kind of merge

24 1 Lichtenstein 2. together in my head. 3 Anything else you recall? 4 I'm trying to, I would say that's 5 the bulk of the claims that I had to deal with. 6 In what context were you 7 providing testimony on a hearing disorder? 8 MR. LOCKINGER: Objection. 9 You can answer. 10 For the last ten years I've been 11 in charge of candidate testing at the Police 12 Department and people who have been disqualified 13 have the right to an appeal. 14 I'm also in charge of civilian 15 affairs, and as part of the civilian contract 16 with the city, they can apply for grants of lost 17 time, and I represent the department if there is 18 a dispute about not awarding grants to those 19 civilians. 20 Civilian affairs oversees what 21 type of employee? 2.2 Anyone who doesn't have a Α 2.3 firearm. 2.4 There's multiple titles in the

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department, such as traffic enforcement, school

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25 1 Lichtenstein 2. safety, PCT. Are there instances in which an 3 4 individual becomes a police officer and is no 5 longer a police officer, but falls under the civilian affairs umbrella? 6 7 Α No. The reverse is true. They may be civilians. 8 9 And then become a police officer? 10 Yes. Police officer is what is 11 called a competitive title. 12 Meaning you have to take a test? 13 A There has to be a certain amount 14 of college credits, they have to take a special 15 test, they have to have a certain level of 16 physical and mental fitness. 17 And so had the Police Department 18 disqualified someone for entrance because of a 19 hearing condition? 20 Α Yes. 21 And have you, was the decision 2.2 based on your analysis? 23 MR. LOCKINGER: Objection. 2.4 You can answer. 25 Α Yes.

26 Lichtenstein 1 2. And were you offering testimony 0 3 as part of an appeal? 4 Α Yes. 5 How did that appeal process work? 6 Do you remember the name of the individual, by the way? 7 8 There's far too many persons. So you offered testimony on 9 10 multiple occasions regarding individuals who 11 were disqualified for hearing conditions? 12 A Correct. 13 Do you remember any names? 14 Α No. 15 0 So tell me how the appeal process 16 worked and how it results and you provide 17 testimony. 18 So the individual is 19 disqualified, I assume they get a letter? 20 The candidates come in and they 21 are tested, they are screened by one of our 2.2 officers, and if their audio threshold is 23 abnormal then we place them on review and they 2.4 go to an independent private, either audiologist

or ENT doctor, and then they provide an

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27 1 Lichtenstein 2. independent evaluation of that person's hearing. If that still shows a severe 3 4 deficiency, then at that point the candidate is 5 disqualified and at that point they can mount an 6 appeal. 7 But as part of this procedure, you send the individual to a private doctor 8 9 outside the department? 10 Α Correct. 11 And was that done in every single 12 instance in which you disqualified someone with 13 a hearing condition? 14 MR. LOCKINGER: Objection. 15 You can answer. 16 Yes. Α 17 And you ultimately provided 18 testimony because the individual appealed the 19 decision? 20 MR. LOCKINGER: Objection. 21 You can answer. 2.2 Α Correct. 23 And in the instances in which you 24 provided testimony related to an appeal 25 concerning a hearing condition, did any of the

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1	Lichtenstein	20
2	individuals prevail on their appeal?	
3	MR. LOCKINGER: Objection.	
4	You can answer.	
5	A Yes.	
6	Q Approximately how many?	
7	A One.	
8	Q Do you know the individual's	
9	name?	
LO	A I don't recall, but the	
L1	circumstances were that it was, it was a veteran	
12	from Iraq who had an IAD explode by his head, he	
L 3	had a relatively severe hearing deficiency on	
L 4	one side, his other side was normal. We went	
15	we were in the initial aspects of his appeal	
L 6	where we actually appeared in front of a	
L 7	magistrate, he provided new medical data at that	
L 8	hearing and I reversed my decision and I	
L 9	qualified him.	
20	Q When you say "magistrate," what	
21	do you mean by that?	
22	A There is a panel of four or five	
23	people appointed by the city to hear these	
2 4	cases.	
25	I think it's called an OATH	

29 1 Lichtenstein 2. trial. 3 Right, the administrative law 4 judges for the City of New York. 5 I just wanted it to be clear. 6 A If I'm unclear it's because, once 7 again, I just don't know the jargon. 8 I understand. 0 9 Tell me how, if at all, would you factor in corrective devices in cases involving 10 11 someone with a hearing deficiency? 12 MR. LOCKINGER: Objection. 13 You can answer. 14 The patrol guide clearly states 15 that you are not allowed to have any external 16 device that would interfere with your 17 performance as a police officer. 18 And up until recently that was 19 pretty much our policy. 20 However, we were just recently overturned in court. 21 2.2 And tell me what you know about 2.3 that. 2.4 Α It was somebody in the 25 management, he was a deputy inspector from

30 1 Lichtenstein 2. internal affairs, and he had applied through his 3 insurance for a hearing aid, and because he's 4 still a uniformed member of the service, he was 5 placed on review and his hearing had, for one reason or another, gone to the point where he 6 7 needed an external audio device, and he was 8 pensioned from the job, he had an ordinary 9 disability pension from the job and he 10 challenged it and he won in court and he's been 11 reinstated. 12 What is his name? 0 13 I'm sorry, I'm not good with 14 names. 15 It's a matter of public record. 16 And that was a case filed in 17 court against the New York City Police 18 Department for disability discrimination? 19 MR. LOCKINGER: Objection. 20 You can answer, if you 21 can. 2.2. I believe so, and I believe it Α 2.3 was 2014 or 2015. 2.4 0 It was a recent case?

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Yes.

31 1 Lichtenstein 2 What about, you said external 0 devices. 3 4 What do you mean by that? 5 Α Crutches, braces, those kinds of 6 things. 7 0 What about an implant? No, it would -- implants 8 9 generally wouldn't qualify as an external 10 device. 11 What about a small hearing aid 12 that you couldn't see? 13 The argument at the time, and we 14 have since changed our policy, was that that 15 could be knocked out during a struggle, so it 16 was still considered an external device. 17 But the policy has been changed? 0 18 Α Yes. 19 How about fibromyalgia, what 20 happened with that? 21 The person withdrew. 2.2 0 They withdrew their appeal? 23 Α Yes. 2.4 And you disqualified someone 25 because they have fibromyalgia?

32 Lichtenstein 1 2. Α Yes. 3 Is that a disqualifying 0 4 condition? 5 MR. LOCKINGER: Objection. 6 You can answer. 7 Α Can I answer that in a broader sense or do you want a specific answer to the 8 9 fibromyalgia question? 10 I want an answer to my question. 11 In the case of the fibromyalgia 12 person, she was currently having a flare when 13 she applied for the job, but, generally 14 speaking, as of five years ago we got a 15 directive from the law department, we used to 16 have --17 MR. LOCKINGER: Objection. 18 You can tell me what the policy 19 is now without telling me what directives you 20 got from lawyers. 21 The policy now is that we do 2.2 not -- there is no absolute medical 23 contraindication to being a police officer, that 2.4 every case needs to be individually assessed. 25 So there is no automatic

33 Lichtenstein 1 2. exclusion for fibromyalgia? 3 No longer. Α 4 Was there five years ago? 0 5 There were automatic exclusions Α 6 for certain medical disorders. And would that include MS? 7 0 Yes. 8 Α 9 When did that policy change? 10 Α Roughly five years ago. 11 Before five years ago, you were 12 automatically excluding everyone with MS? 13 MR. LOCKINGER: Objection. 14 You can answer. 15 Α Yes. 16 And you were automatically excluding everybody with fibromyalgia? 17 18 A No. 19 Tell me the conditions that you 20 are familiar with that resulted in automatic 21 exclusions five years ago. 2.2 MR. LOCKINGER: Objection. 23 You can answer. 2.4 Seizure disorder, progressive Α 25 neurological disorders such as MS, Parkinson's

34 1 Lichtenstein 2. disease, sickle cell anemia, the loss of one or 3 both limbs. 4 It was a short list. 5 It was, and this is the list? Q 6 Yes. Α Seizure disorders? 7 Seizure disorders, on medication. 8 Α 9 Seizure disorders, even if you're 10 on medication? 11 No, seizure disorder if you are 12 taking medication. 13 If you are not taking medication, 14 then it wasn't an automatic disqualification. 15 I'm not sure I understand. I'm 16 sorry. 17 If you had a history of seizure 18 disorder and you're not taking pills, then it's 19 not an automatic disqualification. 20 Why? Q 21 Because you don't have active 2.2 disease and the nature of that disorder is 23 sometimes it could just go away. 2.4 So it's active? Q 25 Α Active.

35 Lichtenstein 1 2. And progressive neurological 0 3 disorders and you mentioned such as MS. 4 Anything else? 5 Parkinson's disease. Α 6 Parkinson's disease, sickle cell 7 and loss of one or more limbs, correct? 8 Α Yes. 9 That's the full list, as you recall? 10 11 A Yes. 12 A third category mentioned that 13 you have offered testimony related to seizure 14 disorders. 15 So tell me what you offered 16 testimony on related to seizure disorders? There was a candidate who as I 17 18 recall was initially diagnosed as having 19 seizures after playing video games, was 20 successfully treated with medication, the 21 medication was withdrawn, and two years later 2.2 when that person was playing video games again 23 started having seizures. 2.4 And what happened, were they 25 disqualified from being a police officer?

36 Lichtenstein 1 2. Based on that, there was a 3 question of photostimulus --4 0 Right. 5 -- I referred that person to the 6 department neurologist. I didn't make that 7 decision. 8 The department employs other 9 doctors in other specialties and in that case, 10 because I had a question, I referred him to the 11 department neurologist and the department 12 neurologist disqualified him. 13 And although I have ultimate 14 authority, I agreed with him in that case. 15 The individual who had the 16 seizure condition related to video games, do you 17 know his name? 18 A No. 19 Was the individual set for an 20 evaluation outside of the NYPD? 21 Α Yes. And so this individual was sent 2.2 23 to a department neurologist and someone outside

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of the NYPD?

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Yes.

37 Lichtenstein 1 2. So two separate opinions? 0 3 Yes. Α 4 And ultimately what was the 5 determination? 6 It's an open case. 7 And any other seizure disorders 8 that you offered testimony related to other than 9 this one related to video games? 10 Α No. 11 0 That's the only one? 12 Α Yes. 13 Going back to the conditions that 14 resulted in automatic disqualifications five 15 years ago, what would happen in the instance of 16 someone was diagnosed with a progressive 17 neurological disorder after they became a New 18 York City police officer? 19 MR. LOCKINGER: Objection. 20 You can answer, if you 21 can. 2.2 If it came to our attention in 2.3 the medical division, because we have no way of 2.4 following officers unless they bring their medical disorder to our attention, so they would 25

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Lichtenstein 1 2. either have to call out sick or independently 3 make us aware that they have a medical issue. 4 We don't screen them as full-duty police 5 officers for medical illnesses, they would have 6 to report it to us. So if a member had an 7 exacerbation of their disorder and had been in 8 9 the hospital, then at that time their guns would 10 be removed and they would be placed on 11 restricted duty for one year. 12 If no new information was 13 forthcoming that would satisfy us in the medical 14 division that that officer could safely fulfill 15 all the duties, then they would be pensioned 16 from the job. 17 So if I understand your testimony 18 correctly, a diagnosis after the commencement of 19 employment as a New York City police officer 20 wouldn't automatically result in termination or 21 in taking away duties? 2.2 MR. LOCKINGER: Objection. 2.3 Do you understand? 0 2.4 Α Yes. 25 And that answer is, it depends on

Lichtenstein

how that disorder was reported.

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For example, if it was reported conversationally that the officer had been diagnosed with MS and had been under therapy for five years, six years, and was stable, then for the most part no action would be taken by the medical division.

On the other hand, if that officer became acutely ill from the disorder, at that point in time they would be removed from full duty status and placed on restricted duty until a one-year period of time during which either that officer would recuperate or not recuperate and then be sent to the pension board.

Q So, again, the Police

Department's knowledge of an MS diagnosis does

not, after someone commences employment as a

police officer, doesn't automatically result in

disqualification from active duty?

MR. LOCKINGER: Objection.

- Q It's a yes or no question.
- A Yes.
- Q And that was the policy five

40 1 Lichtenstein 2. years ago? 3 Α Yes. 4 Q Has the policy changed? 5 Α No. 6 And you have testified that the 7 department had a neurologist on staff; is that 8 correct? 9 Α Yes. 10 What is that individual's name? 0 11 A I believe his name is Dr. 12 Maniscalco. 13 Spell that, please? 0 14 Α I can't. Maniscalco. 15 0 And in how many instances in the 16 last year have you referred patients to Dr. 17 Maniscalco? 18 A 'scalco. 19 'scalco. 0 20 MR. LOCKINGER: Objection. 21 You can answer. 2.2 Α I would estimate ten times. 23 And of those ten referrals, how 24 many of them were related to disqualifications 25 from the cadet program?

41 1 Lichtenstein 2. MR. LOCKINGER: Objection. 3 You can answer. 4 I'm not sure. 5 Any of them? This is just going 0 6 back the last year? 7 I'm not sure. I know there were, I know that there -- I believe there were one or 8 9 two specific MS cases within the last year or 10 two, and I don't remember if they were cadets or 11 police officer candidates. 12 When you say there were one or 13 two MS cases in the last year, tell me what you 14 remember. 15 I remember that in those two 16 instances they were actually hired. 17 Tell me what happened with the 18 first one. 19 A I believe that the unifying 20 factor in both of those cases was that the 21 disease had a certain degree of longitude where 2.2 they were asymptomatic and cleared by their own 2.3 doctors. 2.4 So I asked you about referrals 25 and you said there were ten, and you are

42. 1 Lichtenstein 2. testifying that two of them related to MS? 3 I believe so, yes. 4 And of those they were 5 individuals that were either trying to enter the 6 cadet program or enter the department? 7 MR. LOCKINGER: Objection. 8 You can answer. 9 Yes. Α 10 And both those individuals were 11 offered entry into the department or the 12 program? 13 MR. LOCKINGER: Objection. 14 You can answer. 15 Α Yes. 16 And the reason, as you sit here 17 today, the reason you believe they were offered 18 entrance into the program is because they were 19 determined to be asymptomatic and they were 20 medically cleared by their doctors; is that correct? 21 2.2 MR. LOCKINGER: Objection. 23 You can answer. 2.4 Α They were asymptomatic over a 25 period of time and they had medical clearance

43 1 Lichtenstein 2. from their neurologist. 3 What period of time were they 4 asymptomatic? 5 MR. LOCKINGER: Objection. 6 You can answer, if you 7 can. I believe one was five years and 8 9 the other may have been, I don't know, I recall 10 one of them being five years. I don't exactly 11 recall the date, and I don't want to guess. 12 But I will say around the same 13 time, within a five-year period. 14 MR. HARMAN: We are going 15 to follow up with a writing, but 16 we are going to ask for all records related to these 17 18 instances where, I think it's 19 easier rather than rambling on in 20 the record about the documents 21 that we want, but we are going to 2.2. make some specific document 23 demands and you can follow up 2.4 with your lawyer, because we'll 25 be submitting the document

		1 1
1	Lichtenstein	44
2	requests relating to transcripts	
3	of deposition testimony and	
4	people work related to	
5	evaluations and referrals.	
6	I will just make that	
7	simple record so that we don't	
8	spend time today on that.	
9	We will put it in a letter	
10	and serve some supplemental	
11	requests.	
12	Q Is there a number of years, does	
13	the department have a rule or regulation related	
14	to the number of years you have to be	
15	asymptomatic in order to qualify with respect to	
16	an MS diagnosis?	
17	MR. LOCKINGER: Objection.	
18	You can answer, if you	
19	can.	
20	A There is no exact time period.	
21	But	
22	Q So the department doesn't have a	
23	rule or regulation?	
24	A There is no rule or regulation.	
25	Q With respect to these two	
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45

1	Lichtenstein	45
2	individuals, what prompted you to refer them to	
3	the neurologist?	
4	A They were in good physical	
5	condition with no neurological deficits, they	
6	had very strong letters from their neurologist	
7	that they were in remission, and a reasonable	
8	amount of time had occurred since their last	
9	episode.	
10	Q What's a reasonable amount of	
11	time?	
12	MR. LOCKINGER: Objection.	
13	You can answer.	
14	A For me it's three years, more or	
15	less three years, and not much less.	
16	Q And in your professional	
17	experience, how did you arrive at three years as	
18	being a reasonable amount of time that someone	
19	should be in remission?	
20	A Unfortunately, multiple sclerosis	
21	is a progressive neurological disorder with no	
22	cure.	
23	No medical authority can predict	
2 4	how one person is going to do without a certain	

25

amount of time going by.

46

1	Lichtenstein	-
2	Most studies about predicting th	9
3	body of remission time and disability usually g	Э
4	from three to five years from when the person	
5	was diagnosed.	
6	MR. HARMAN: Can you read	
7	back the answer, please?	
8	(Whereupon, the record wa	S
9	read back by the reporter.)	
LO	Q What studies are you referring	
L1	to?	
12	A I can't reference them at this	
L 3	time.	
L 4	Q Can you name any study that talk	S
L 5	about three to five years?	
L 6	A Not at this time.	
L 7	Q All right.	
L 8	You have been deposed a lot, so	
L 9	I'm only going to remind of the ground rules.	
2 0	First, my name is Walker Harman.	
21	I'm an attorney and I represent Randy Umanzor,	
22	who is the plaintiff in an action he's brought	
23	against the New York City Police Department and	
2 4	he's sitting here at the end of the table.	
25	For the record, have you ever me	t

			4 -
1		Lichtenstein	47
2	Mr. Umanzor?		
3	А	No.	
4	Q	Have you ever seen him in person?	
5	А	I may have when he was at the	
6	medical divisi	on, but I didn't examine him.	
7	Q	You didn't examine him.	
8		Why do you say you may have seen	
9	him?		
10	А	I'm conducting physical exams in	
11	the medical di	vision, and the group of	
12	candidates are	usually in front of me at some	
13	point or anoth	er.	
14	Q	Did you ever speak with anybody	
15	who examined h	im?	
16	A	No.	
17	Q	And you didn't refer him to a	
18	neurologist?		
19	A	No. He was placed on review.	
20		I was going to generally	
21	speaking, in t	hese cases I'm going to go by the	
22	private neurol	ogist evaluation.	
23	Q	You didn't refer him to the	
24	department neu	rologist?	
25	A	No.	

48 Lichtenstein 1 2. And you didn't refer him to an 3 outside neurologist? 4 No. I requested his records of 5 his own private neurologist. 6 I'm going to ask, I have been and 7 will continue to ask you questions concerning 8 Mr. Umanzor's claims against the department. 9 Do you understand that? 10 Α Yes. 11 If you want to take a break 12 during the deposition, you can take a break. 13 would ask that you finish any pending question 14 before you take that break. 15 We should try not to interrupt 16 each other as best we can. That's something 17 that we will both try to work on and I'll ask 18 you to verbalize any answers to any question 19 which you've been doing and I appreciate that. 20 You recognize that you're under 21 oath today? 2.2 Α Yes. 23 And that failing to tell the 2.4 truth at a deposition is a crime called perjury. 25 Do you understand that?

1		Lichtenstein	49
2	А	Yes.	
3	Q	What is your date of birth?	
4	А	2/3/1955.	
5	Q	What's your home address?	
6		MR. LOCKINGER: Objection.	
7		You can serve a subpoena	
8		on us and we will accept it.	
9		MR. HARMAN: Are you	
10		directing him not to answer the	
11		question?	
12		MR. LOCKINGER: Yes.	
13	Q	To what address do you report to	
14	work?		
15	А	I believe it's 1 Lefrak Plaza. I	
16	don't know the	exact address actually.	
17	Q	Are you currently employed?	
18	А	Yes.	
19	Q	Do you have multiple, are you	
20	employed by mul	ltiple entities?	
21	А	Yes.	
22	Q	How many?	
23	А	Three.	
24	Q	Tell me about the first one.	
25	А	I work for the New York City	
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1		Lichtenstein	50
2	Police Departmen	nt.	
3	Q W	That's your job?	
4	A I	'm in charge of candidate	
5	testing and civi	lian affairs.	
6	Q W	That's your job title?	
7	A I	am deputy chief surgeon.	
8	QI	Is that a full-time job?	
9	A N	No.	
10	QI	It's part time?	
11	A Y	es.	
12	Q D	oes it have a certain amount of	
13	hours associated	d with it? Are you required to	
14	work certain hou	irs?	
15	A I	think there's a minimum, but	
16	there's no real	time involved. It's as per the	
17	needs of the dep	partment.	
18	Q H	How long have you held that	
19	title?		
20	A D	December 5, 2001.	
21	Q A	and were you appointed to that	
22	position?		
23	A Y	es.	
24	Q W	Tho appointed you?	
25	A I	think it was Commissioner	
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			_ 1
1		Lichtenstein	51
2	Kerik.		
3	Q E	lave you ever been disciplined by	
4	the NYPD?		
5		MR. LOCKINGER: Objection.	
6		You can answer.	
7	A N	o.	
8	Q E	lave you ever had your pay taken	
9	away?		
10	A N	o.	
11	Q E	las your job status ever changed	
12	since December o	of 2001?	
13		MR. LOCKINGER: Objection.	
14		You can answer.	
15	A Y	es.	
16	Q E	as it increased?	
17	A Y	es.	
18	Q F	lave you ever received	
19	performance eval	uations?	
20	A Y	es.	
21	Q W	Then is the last time you	
22	received a perfo	rmance evaluation?	
23	A I	think they are either quarterly	
24	or monthly. I'm	n not sure.	
25	Q E	lave you gotten them on a regular	

52 Lichtenstein 1 2. basis? 3 I believe so. 4 Do you get a certain overall, how 5 do they rate your performance? 6 MR. LOCKINGER: Objection. 7 You can answer, if you 8 can. 9 I don't know. I'm not sure. Α 10 Did you review them? Q 11 No, I've always gotten good 12 recommendations, so I've never really reviewed 13 my performance status. 14 So you've never read the written 15 performance -- did you get written performance 16 evaluations? 17 A Yes. 18 And you chose not to read them? 0 19 Α Yes. 20 Where are they now? 21 I believe they are on file at the 2.2 medical division. 23 Is that a file that you control? 2.4 Α No. 25 So when you are provided with a Q

53 1 Lichtenstein 2. copy of your evaluation, what have you done with 3 it? 4 I don't think I have ever kept Α 5 it. 6 You just throw them away? Q 7 I think so. Α 8 Are you under the influence of 0 9 alcohol? 10 No. 11 Have you had anything to drink in 12 the last eight hours, alcohol? 13 Α No. 14 Are you taking any medications? 15 No. Α 16 Have you been prescribed any 17 medications that you have chosen not to take? 18 Α No. 19 Can you think of any reason why 20 you can't give your best and truthful answers 21 here today? 2.2 Α No. 23 Did anyone tell you to provide 2.4 dishonest answers here today? 25 A No.

54 Lichtenstein 1 2. What, if anything, did you do to prepare for today's deposition? 3 4 I met with the city corporation 5 counsel attorney. 6 Who is that? 7 Α This gentleman to my left (indicating). 8 9 Do you know his name? Q 10 Α I'm sorry, no. 11 MR. HARMAN: So let the 12 record reflect that the witness 13 has gestured to Mr. Lockinger, 14 who is the attorney of record for 15 the department in this action. 16 0 When did you meet with the city 17 attorney? 18 I believe we met, I believe we 19 met sometime last week. It could have been last 20 Wednesday or Thursday. 21 Where did that meeting take 2.2 place? 23 At the city corp counsel 2.4 headquarters. 25 Q And was that in a private office?

1		Lichtenstein	55
2	А	Yes.	
3	Q	Was anyone else present?	
4	А	Yes.	
5	Q	Who else was present?	
6	А	There was a representative from	
7	the NYPD legal	bureau.	
8	Q	An attorney?	
9	A	Yes.	
10	Q	What's that person's name?	
11	A	I don't have her name, but it's a	
12	matter of reco:	rd.	
13	Q	Had you met with her before?	
14	А	In other matters.	
15	Q	Not in this matter?	
16	А	No.	
17	Q	Was anyone else present?	
18	А	I don't believe so.	
19	Q	And how long did that meeting	
20	take place?		
21	А	Three or four hours.	
22	Q	And did you look at any documents	
23	during that me	eting?	
24	А	No, I don't think I did.	
25	Q	Did you take any notes?	
		MCM REPORTING SERVICE	

			56
1		Lichtenstein	30
2	A	No.	
3	Q	Did you listen to any recordings?	
4	A	No.	
5	Q	Did you watch any videos?	
6	A	No.	
7	Q	Did you call anyone on the phone?	
8	A	No.	
9	Q	And other than this three or	
10	four-hour meet:	ing with the city attorney and the	
11	representative	from the Police Department, did	
12	you do anythin	g else to prepare for your	
13	deposition?		
14	A	No.	
15	Q	Do you maintain a file on Mr.	
16	Umanzor?		
17	A	I do not.	
18	Q	Does the Police Department have a	
19	file on Mr. Uma	anzor?	
20		MR. LOCKINGER: Objection.	
21		You can answer, if you	
22		can.	
23	A	Yes, I believe they do.	
24	Q	When was the last time you	
25	reviewed that :	file?	

57 Lichtenstein 1 2. Α I don't know. 3 Well, were you given a copy of 4 the subpoena summoning you to appear today for 5 your testimony? 6 I don't believe so. 7 When did you first learn that you were being deposed? 8 9 I don't remember. 10 How did you learn? 11 I was notified at first by the 12 chief surgeon's office, and then I was in 13 contact with a member of the legal bureau from 14 the department that I was going to have a 15 meeting with city corp counsel attorneys. 16 And that was the meeting that 17 took place you think last Wednesday? 18 A Yes. 19 And you didn't meet with the city 20 attorney before last Wednesday? 21 MR. LOCKINGER: Objection 2.2 to form. 23 You can answer. 2.4 Α No. 25 Did you speak with him on the Q

58 Lichtenstein 1 2. phone? 3 MR. LOCKINGER: Objection. 4 You can answer. 5 Α Since that conversation, yes. 6 Since the Wednesday conversation? 7 Α Yes. 8 When you first learned, after you 0 9 learned that you were going to be meeting with 10 the city attorney providing testimony, did you 11 review Mr. Umanzor's file? 12 MR. LOCKINGER: Objection. 13 You can answer. 14 I believe I did. Α 15 When was that? 0 16 I don't remember. Α 17 Was it in the last couple of 18 months? 19 Probably. Α 20 So tell me what you did to review the file. 21 2.2 I looked at his medical records 23 and reviewed his MRI report and his physician's 2.4 assessment. 25 Where is the file located?

1		Lichtenstein	59
2		MR. LOCKINGER: Objection.	
3		You can answer.	
4	A	I believe it's at the medical	
5	division.		
6	Q	Where is that?	
7	A	Lefrak Plaza.	
8	Q	What floor?	
9	A	Sixteenth floor.	
10	Q	Can you describe where you	
11	located the fi	le?	
12	А	I believe the file was brought to	
13	me on my reque	est to my office.	
14	Q	Who did you ask for the file?	
15	A	One of the civilian employees.	
16	Q	Do you remember that person's	
17	name?		
18	A	No.	
19	Q	Who would you normally go to to	
20	retrieve a fil	_e?	
21	А	I would request it from one of	
22	the secretarie	es.	
23	Q	Who are the secretaries?	
24	А	I'm not good with names.	
25	Q	How many secretaries are there	

60 Lichtenstein 1 2 that support you? 3 MR. LOCKINGER: Objection. 4 You can answer. 5 Five. Α 6 You don't know any of their names? 7 No. I think one of them is named 8 Α 9 Dawn, but I don't know any of their last names. 10 Is Dawn the one that retrieved 11 Mr. Umanzor's file? 12 Α Probably. 13 Is she someone you go to more 14 frequently than others? 15 She's the one I deal with most 16 often. 17 How old is Dawn? 0 18 Thirty-five, thirty-six. Α 19 And Dawn or someone brought you 0 20 the file? 21 Α Yes. 22 And what did you do then? You 23 said you looked at the MRI and doctor's 2.4 assessment. 25 After you did that, what did you

1		T i obtonotoin	61
1		Lichtenstein	
2	do?		
3	A	I don't understand the question.	
4	Q	Did you return the file?	
5	А	Yes.	
6	Q	Did you give it back to Dawn or	
7	someone else?		
8	А	Yes.	
9	Q	Did you make a copy of it?	
10	А	No.	
11	Q	Did you take any notes?	
12	А	No.	
13	Q	Did you take pictures of it?	
14	А	No.	
15	Q	And you believe that you did that	
16	after you were	alerted that you were going to be	
17	meeting with t	he city attorney?	
18		MR. LOCKINGER: Objection.	
19		You can answer.	
20	A	Yes.	
21	Q	Do you use e-mail for work?	
22	А	No.	
23	Q	Not at all?	
24	А	No.	
25	Q	Do you have any social media	
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1		Lichtenstein	62
2	accounts?		
3	А	Facebook.	
4	Q	What's your Facebook name?	
5	А	I think it's David Lichtenstein.	
6	Q	How about LinkedIn?	
7	А	No.	
8	Q	Any other social media accounts?	
9	А	Instagram.	
10	Q	You do have Instagram.	
11		And what's your Instagram account	
12	name?		
13	А	I think it's the same thing.	
14	Q	How frequently do you post on	
15	Facebook?		
16	А	Maybe two or three times a week.	
17	Q	And how about Instagram?	
18	А	Maybe every three or four months.	
19	Q	Do you take pictures and post	
20	them?		
21	А	Yes.	
22	Q	What types of things do you take	
23	pictures of?		
24	А	My granddaughter.	
25	Q	So family and friends.	
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1		Lightonetoin	63
1		Lichtenstein	
2	A	Yes.	
3	Q	Do you ever post anything on	
4	Instagram that	is related to your medical	
5	practice?		
6	А	No.	
7		MR. LOCKINGER: Objection.	
8		You can answer.	
9	Q	How about your job as the deputy	
10	chief at the de	epartment?	
11	А	No.	
12	Q	How about on Facebook, do you	
13	ever post anytl	hing related to your medical	
14	practice?		
15	A	No.	
16	Q	Ever post anything related to	
17	your role at the department?		
18	A	No I'll say no.	
19	Q	Who is the chief surgeon of the	
20	department?		
21	A	Dr. Kleinman.	
22	Q	And what type of relationship	
23	professionally	do you have with Dr. Kleinman?	
2 4	А	He's my superior.	
25	Q	And how long has he been your	

64 1 Lichtenstein 2. superior? 3 Ten years, maybe 15 years. 4 Is the chief's position a 5 full-time role? 6 A Yes. 7 And have you ever discussed Mr. Umanzor with Dr. Kleinman? 8 9 MR. LOCKINGER: Objection. 10 You can answer. 11 I did apprise him that I was 12 going to be giving a deposition today. 13 And what, if anything, did he say 14 in response? 15 Α Nothing. So other than to alert him that 16 17 you were going to be engaged in this activity, 18 did you discuss Mr. Umanzor in any other way 19 with Dr. Kleinman? 20 Not specifically, no. 21 Generally? 0 2.2 It generally encompasses his Α 23 medical issue, not specifically this candidate 2.4 in question. 25 Tell me what medical issue, tell

65 Lichtenstein 1 2. me what you discussed related to his medical 3 issue. 4 MR. LOCKINGER: Objection. 5 You can answer. 6 A Our evaluation for certain medical disorders is transitional and we have 7 8 talks from time to time about the changing 9 attitudes that we have in terms of qualification 10 and disqualification. 11 On how many occasions have you 12 discussed the transitional nature, I take it we 13 are talking about MS? 14 A No, a host of disorders, but MS is one of them. 15 16 Other than MS, what are the other 17 disorders that are transitional medical issues 18 where attitudes are changing? 19 A Seizure disorder and hearing. 20 How many times in the last year 21 have you discussed the transitional nature of MS 2.2 and the changing attitudes? 2.3 MR. LOCKINGER: Objection. 2.4 You can answer. 25 Α At least five or six times.

66 Lichtenstein 1 2. Tell me about the first one. 0 I know we have had discussions 3 4 regarding the one or two persons with MS that we 5 qualified within the last year or two. 6 After appeal? 7 MR. LOCKINGER: Objection. You can answer. 8 9 I don't think that they were Α 10 appealed. 11 I think they were on review. I 12 don't think it ever went to an appeal. 13 In other words, if someone puts 14 down that they have multiple sclerosis, then 15 that would generate a review. 16 I believe in those two cases, at 17 least definitely in one case, the review found 18 that the candidate was qualified and it did not 19 go to an appeal. 20 I think I believe that both cases 21 did not go to an appeal, but I'm not 100 percent 2.2 sure. 23 Well, I asked you about those 24 cases and you said you believed that you had

offered testimony, correct?

25

67 Lichtenstein 1 2. MR. LOCKINGER: Objection. 3 You can answer. 4 I don't believe I said that. 5 Perhaps I asked you that in the 6 context of referrals to neurologists and so I 7 apologize. 8 Let's go back to your discussion 9 with Dr. Kleinman. 10 You testified that you discussed 11 these two instances where candidates, and you 12 don't recall whether it was a candidate for the 13 department or a candidate for the program, 14 correct? 15 Correct. Where those individuals were 16 17 placed under review because they indicated that 18 they had been diagnosed with MS, correct? 19 A Yes. 20 And if anyone indicates that they have been diagnosed with MS, they are 21 2.2 automatically placed under review? 23 MR. LOCKINGER: Objection. 2.4 You can answer. 25 Α Yes.

68 1 Lichtenstein 2. Was Mr. Umanzor placed under 0 3 review? 4 Yes. 5 And what did you say to Dr. 6 Kleinman about those two individuals that were placed under review because of their MS? 7 8 Well, our general discussion is 9 always the same, that we have to try to adhere 10 to the spirit of the Americans With Disabilities 11 Act. 12 Can the candidate do the job 13 today? And what supporting data do we have that 14 would suggest or give us doubt in that regard. 15 That was the nature of the 16 conversation? 17 Those are the nature of 18 conversations in all of these cases. 19 And so tell me with respect to 0 20 those two individuals what Dr. Kleinman said. 21 He thought that based on the 2.2 private medical records of those individuals and 2.3 the recommendation of the department 2.4 neurologist, my recommendation, that those two 25 candidates could be qualified.

69 1 Lichtenstein 2 Did you go to Dr. Kleinman for Q 3 final approval? 4 MR. HARMAN: Objection. 5 You can answer. 6 Α No, it was more of a for your 7 information. 8 So you were seeking his advice? 0 9 Yes. Α 10 So informal approval? 11 MR. LOCKINGER: Objection. 12 Α Yes -- well --13 But he doesn't have to sign off 14 on what you do? 15 No. Α 16 And he supported your 17 determination in those two instances? 18 Α Yes. 19 0 Did you discuss Mr. Umanzor with 20 him? 21 Α Yes. 2.2 What did you say to him? Q 23 I told him that this candidate 24 appeared to have intact neurological status with 25 no real deficiencies, but my concern was that

70 Lichtenstein 1 2. the time of his diagnosis to the time he was 3 applying for his position was too short. 4 Did you say anything else? 5 No. Α 6 And what did he say in response? 7 Α He reminded me that every case 8 has to be individually assessed and that was it. 9 MR. HARMAN: Can you read 10 back the answer? 11 (Whereupon, the record was 12 read back by the reporter.) 13 Q What was the time period? 14 MR. LOCKINGER: Objection. 15 Α As I recall, it was less than a 16 year. And what would have been a 17 18 satisfactory time period for you? 19 MR. LOCKINGER: Objection. 20 You can answer, if you 21 can. 2.2 Actually in this case, because he 23 was going from cadet to police officer, I 2.4 probably would have been happy with two years, 25 because then it would have been another two

71 1 Lichtenstein 2. years of his college before, four years would 3 have gone by before he actually came up for his 4 new physical exam for his police officer status. 5 So as I understand that there are 6 different criteria for determining whether 7 someone can be a cadet as opposed to whether 8 someone can be a police officer? 9 MR. LOCKINGER: Objection. 10 You can answer, if you 11 can. 12 Α Technically, yes, in a real 13 sense, no. 14 We are entering into a contract 15 with them that they are going to become police 16 officers. 17 Technically, at the time that we 18 enter into that contract, they're not going to 19 the academy, they're not expected to make 20 arrests, they're not given a firearm. 21 But you have testified that you 2.2. applied different standards to assessing whether 23 someone was qualified to be a cadet? 2.4 MR. LOCKINGER: Objection. 25 Α That's not exactly correct.

72. 1 Lichtenstein 2. Well, you said that because he 0 3 was applying to be a cadet, you would have been 4 happy with two years, because by the time he 5 applied to be a police officer, the period would 6 be longer than two years, correct? Correct. 7 Α 8 More in the range of that three 9 to five that you testified earlier that you 10 found acceptable? 11 A Correct. 12 And you have testified that as a 13 cadet you don't make arrests? 14 MR. LOCKINGER: Objection. 15 Α Correct. 16 And you don't go to the academy? I don't know. I don't believe 17 18 they enter into formal academy training. 19 But you're not sure? 20 They may have some academics that 21 they -- I'm not exactly sure. 2.2 You have testified that cadets 2.3 don't make arrests, correct? 2.4 Α Correct. 25 Q Do cadets have to control civil

			73
1		Lichtenstein	
2	disorder?		
3		MR. LOCKINGER: Objection.	
4		You can answer.	
5	A A	As far as I know, the answer is	
6	no.		
7	Q	Oo cadets have to collect and	
8	preserve evidend	ce?	
9	A 1	No.	
10	Q	Oo cadets have to assess a crime	
11	scene?		
12	A 1	No.	
13	Q	Oo cadets have to operate	
14	vehicles?		
15		MR. LOCKINGER: Objection.	
16		You can answer.	
17	A	don't know.	
18	Q	Oo cadets have to arrest DWI	
19	suspects?		
20		MR. LOCKINGER: Objection.	
21		You can answer.	
22	A	They do not.	
23	Q I	Oo cadets have to participate in	
24	disaster control	L?	
25		MR. LOCKINGER: Objection.	
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1		Lichtenstein	74
2	A I don	't know.	
3	Q Do ca	dets have to provide	
4	emergency medical as	sistance as part of their	
5	job duties?		
6		MR. LOCKINGER: Objection.	
7	A I don	't know.	
8	Q Do ca	dets have to interview and	
9	interrogate suspects	?	
10		MR. LOCKINGER: Objection.	
11	A They	do not.	
12	Q Do ca	dets have to engage in motor	
13	vehicle accident pre	vention?	
14		MR. LOCKINGER: Objection.	
15	A I bel	ieve not.	
16	Q Are c	adets placed on patrol?	
17		MR. LOCKINGER: Objection.	
18	A I bel	ieve not.	
19	Q Do ca	dets have to search for and	
20	seize evidence?		
21		MR. LOCKINGER: Objection.	
22	A They	do not.	
23	Q Do ca	dets have to use deadly	
24	force?		
25		MR. LOCKINGER: Objection.	
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75 Lichtenstein 1 2. Α They do not. 3 Do cadets have to respond and 4 investigate crimes? 5 MR. LOCKINGER: Objection. 6 Α They do not. 7 MR. HARMAN: We have been 8 going about an hour. Let's take a five-minute break. 10 (Whereupon, at 12:19 p.m., a 11 recess was taken.) 12 (Whereupon, at 12:30 p.m., 13 the deposition resumed with all 14 parties present.) 15 MR. HARMAN: Back on the 16 record. 17 BY MR. HARMAN: 18 You testified earlier that you 19 placed two individuals who were candidates under 20 review who had identified themselves as having 21 been diagnosed with MS; is that correct? 2.2 Α Yes. 23 Do you recall whether those were 2.4 candidates for the department or the program? 25 Α I believe --

76 Lichtenstein 1 2. MR. LOCKINGER: Objection. 3 You can answer. 4 I believe they were for the 5 department. 6 And you also testified that you 7 placed Mr. Umanzor's file under review as well; 8 is that correct? 9 Yes. Α 10 In the last five years, how many 11 files have you placed under review because the 12 candidates identified themselves as having been 13 diagnosed with MS? 14 MR. LOCKINGER: Objection. 15 You can answer, if you 16 can. 17 Α It will be a guess. It will be 18 an estimate. 19 I would say ten. 20 0 And we talked about three of them and we will talk a lot more about Mr. Umanzor. 21 2.2 Of the ten, we know Mr. Umanzor 2.3 was a candidate for the cadet program, he was an 2.4 applicant for the cadet program, correct? 25 A Yes.

77 1 Lichtenstein 2. Were any of the ten applicants to 0 3 the cadet program? 4 Α I don't think so. I think they 5 were all police officer candidates. 6 So other than Mr. Umanzor, can 7 you think of any instances in which you just 8 disqualified someone from the cadet program 9 because of MS? 10 Α No. 11 And going back to your 12 conversation with Dr. Kleinman, you testified 13 that you believed that Mr. Umanzor had not been asymptomatic for a long enough period of time; 14 15 is that correct? 16 MR. LOCKINGER: Objection. 17 You can answer. 18 Α In my opinion. 19 Did he offer an opinion? 0 20 No. Α 21 By the way, as you sit here 2.2 today, do you stand by your determination that 2.3 Mr. Umanzor should have been disqualified from 2.4 the cadet program? 25 MR. LOCKINGER: Objection.

78 1 Lichtenstein 2. You can answer. 3 Α At the time he presented for his 4 application? 5 0 Yes. 6 Α Yes. 7 And what about as you sit here 8 today? 9 MR. LOCKINGER: Objection. 10 You can answer. 11 Α I'm sorry? 12 What about as you sit here today? 13 In other words, would I consider Α 14 his application today? 15 As you sit here today has your 16 opinion changed? 17 MR. LOCKINGER: Objection. 18 You can answer. 19 Α If he's been asymptomatic since 20 his application, if he has been tolerating his 21 medication with no problems, I would qualify him 2.2 today. 23 You would qualify him today? 2.4 MR. LOCKINGER: Objection. 25 You can answer.

79 Lichtenstein 1 2. Probably, based on his medical Α 3 data. 4 If he had been taking his 5 medication and he was asymptomatic? 6 And he has a clearance letter from his neurologist, yes. 7 8 Well, isn't it true he had a 9 clearance letter from his neurologist? 10 Yes and no. Α 11 He had a clearance letter, but it 12 was not a detailed examination that supported 13 his application. Do you know the name of his 14 15 neurologist? I don't remember. 16 17 Did you ever contact his 18 neurologist? 19 A I did not. 20 Did you ask for additional 21 information from his neurologist? 2.2 Α No. 23 And in the paperwork that you 24 reviewed from his neurologist, did his 25 neurologist indicate that he was medically

80 1 Lichtenstein 2. cleared to be a cadet? 3 MR. LOCKINGER: Objection. 4 Α Yes. 5 And then you determined that the Q 6 submission from the doctor was not detailed 7 enough to support the application? 8 Α No. 9 I -- actually, I did feel that his clearance note was sufficient. 10 11 MR. HARMAN: Can you read 12 back not the last response, but 13 the one prior to that? (Whereupon, the record was 14 15 read back by the reporter.) 16 What do you mean by that? 0 17 Just as I stated yes and no, yes, I felt that in this case with his medical 18 19 documentation that was a sufficient medical 20 clearance letter. 21 No, it wasn't the kind of letter 2.2. that I usually like to see in terms of 23 overturning this kind of diagnosis. 2.4 I would have liked to have seen a 25 more detailed examination, but based on his

81 1 Lichtenstein 2. medical records that were otherwise provided, I 3 thought that the medical letter that was 4 supplied was sufficient enough to have him 5 qualified. 6 But you disqualified him? 7 Α Correct. 8 But the letter on its face was 9 sufficient to qualify him? 10 Α Yes. 11 But you didn't believe it was 12 detailed enough? 13 That's not what I -- I know --14 I'm sorry. I'm not really trying 15 to argue with you, so you believed it was 16 sufficient to qualify him, but you would have 17 preferred to see something more detailed? 18 A Yes. 19 But you didn't ask for something 20 more detailed? 21 No, because the letter wasn't my 2.2 issue. 23 What was your issue? 0 24 My only issue with this candidate 25 was the brevity of his medical history with this

82 1 Lichtenstein 2. diagnosis to his time of application. 3 I felt that the time period was 4 too short. 5 And what was the time period? 6 I believed from his diagnosis and 7 treatment to the time of his application was less than a year, eight or nine months, I 8 9 believe. 10 And is there a policy that the 11 cadet program has with respect to how many 12 months you need to be asymptomatic? 13 MR. LOCKINGER: Objection. 14 Answer if you can. 15 Α There is no set policy that I 16 know of. 17 And how about at the Police 18 Department? How about at the Police Department? 19 MR. LOCKINGER: Objection. 20 Is there a policy that you need 21 to be asymptomatic for any specific period of 2.2 time? 23 No, there is not. Α 2.4 Was Mr. Umanzor entitled to

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appeal your decision?

83 Lichtenstein 1 2. MR. LOCKINGER: Objection. 3 You can answer, if you 4 can. 5 Α I'm not sure. 6 That's my answer. I'm not sure. You testified that you determined 7 0 8 that eight or nine months, your testimony is 9 that you determined that eight or nine months 10 wasn't a long enough period of time to be 11 asymptomatic, but that was not based on a policy 12 or procedure of the department, correct? 13 Α Yes. 14 And that was not based on a 15 policy or procedure of the cadet program, 16 correct? 17 Yes. 18 Was it based on any research that 19 you had conducted? 20 MR. LOCKINGER: Objection. 21 You can answer. 2.2 Α Once again, I don't want to get 23 into an argument. I just don't want to 2.4 misspeak. 25 Research in terms of reading up

Lichtenstein 1 2. on the medical disorder or research in clinical 3 trials? 4 Any clinical research. 5 As far as the literature that I 6 reviewed, I felt that in this case not enough 7 time period had gone by from his diagnosis to 8 his time of application that I could make a 9 reasonable assessment of how he was going to do 10 from the time he signed his contract. 11 And what research did you review? 12 MR. LOCKINGER: Objection. 13 You can answer, if you 14 can. 15 I believe I referenced Harrison's 16 Internal Medicine, and I also, I've also looked at some literature from the American Journal of 17 18 Radiology in terms of his MRI findings. 19 Anything else? 0 20 I believe I also referenced the 21 Journal of Clinical Neurology in MS trends. 2.2 Anything else? Q

informal conversation with the department

neurologist, but there were no notes taken at

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2.4

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I believe that I also had an

85 Lichtenstein 1 2. that time. 3 Anything else? 0 4 Α Not that I can remember at this 5 time. 6 And is it your testimony that you reviewed these resources to make the 7 8 determination to disqualify Mr. Umanzor from the 9 cadet program? 10 MR. LOCKINGER: Objection. 11 You can answer. 12 Α Yes. 13 Do you own a copy of Harrison's 14 Internal Medicine? 15 Yes. Where is it located? 16 17 Α It's in my office. 18 Is it a hard copy book? 0 19 Yes. Α 20 How long have you owned it? 21 I just got the new edition about 2.2 two or three months ago. 23 What edition did you look at to 2.4 make this determination? 25 MR. LOCKINGER: Objection.

86 Lichtenstein 1 2. You can answer, if you 3 can. 4 The 17th or the 18th edition. 5 What, if anything, did you do Q 6 with the older edition when you got the new one 7 a few months ago? I still think I have an older 8 9 edition at the medical division at Lefrak. 10 So you have two editions? Q 11 Probably three. Α 12 And do you know which one you 0 13 looked at? I'm pretty sure I looked at my 14 newest edition. 15 16 The one that you got in the last \bigcirc 17 two months? 18 MR. LOCKINGER: Objection. 19 Α Yes. 20 MR. HARMAN: I'm going to 21 call for the production of those 22 portions of Harrison's Internal 23 Medicine that you reviewed to 2.4 make the determination to 25 disqualify Mr. Umanzor from the

87 1 Lichtenstein 2 cadet program. 3 0 What is the American Journal of 4 Radiology? 5 It was a -- it was a website that Α 6 when I was -- I did a web search to see if there 7 were any new trends in MS and overall prediction 8 rates in the short term for his specific type of 9 MS. 10 So I remember doing a Google 11 search and looking at several, at least four or 12 five hits that I got on my Google search. 13 By the way, did you put any of these resources into your, into Mr. Umanzor's 14 15 file? 16 Α No. 17 0 Where did you perform this Google 18 search? 19 When or where? Α 20 Where? 0 21 At one of my other jobs. I try 22 not to use the department computers because they 23 are just horribly slow, so at one of my other 24 employment areas I have to be on line a lot as 25 part of my job and I research those sites on my

88 1 Lichtenstein 2. computer. 3 How are you compensated? I'm not 4 asking about your rate of pay, but how are you 5 compensated for your job at the department? 6 Salary. Α 7 You don't get paid by the hour? No. 8 Α 9 Do you get paid extra for 10 appearing at the deposition today? 11 A No. 12 So you consider this a part of 13 your job responsibilities with the department? 14 MR. LOCKINGER: Objection. 15 Α Yes. 16 So the American Journal of 17 Radiology was a website that you went to? 18 I know, as I said, I went to 19

A I know, as I said, I went to several websites. One of them was a radiological journal, because there were specific mentions of lesions that this gentleman had when he was diagnosed on his MRI, and just looking to see if there were any new findings that should come into my determination of whether or not we could reasonably assess his

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89 1 Lichtenstein 2. availability for the job. 3 Now, earlier you mentioned Mr. 4 Umanzor's type of MS. 5 What did you mean by that? 6 A He has the most common type, it's 7 relapsing/remitting. I believe 85 percent of 8 people with MS have relapsing/remitting. 9 Is that a progressive condition? 10 MS by definition is a progressive 11 neurological disorder, but people with 12

relapsing/remitting may do very well and not progress for decades.

And do you know what percentage of people with relapsing/remitting MS will do well for decades?

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The last time I checked the CDC website, Center For Disease Control, the majority of people who are diagnosed in their 20s will have a partial or full disability within 15 or 20 years.

And did that factor into your decision to disqualify Mr. Umanzor from the cadet program?

MR. LOCKINGER: Objection.

		0.0
1	Lichtenstein	90
2	You can answer.	
3	A If anything, it prejudiced me to	
4	hire him. But the one factor that I found in	
5	all my research was that it was impossible to	
6	make a diagnosis in the short term of how	
7	someone is going to do with their MS, a period	
8	of time has to go by.	
9	There is no reliable way, there	
10	are no good or bad prognostic indicators that	
11	can tell you within a short period of time who	
12	is going to be, who is going to do well with	
13	their medication and be asymptomatic for a	
14	period of years.	
15	Q So the period of time you're	
16	referring to is the period of time during which	
17	an individual is asymptomatic, correct?	
18	A From their first attack.	
19	Q From their first attack.	
20	And it's your belief that Mr.	
21	Umanzor was asymptomatic for eight or nine	
22	months, correct?	
23	MR. LOCKINGER: Objection.	
24	You can answer.	

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A Yes.

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2.

2.2.

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Lichtenstein

And did the Harrison's Internal Medicine treatise, is it fair to call it a treatise, let's just call it Harrison's Internal Medicine, did that prescribe an appropriate time period during which someone has not relapsed as an indicator for someone's future with MS?

A There is no specific medical data to prescribe a length of time.

The overall thrust of all the medical data is, at this time with multiple sclerosis, the prediction rate has to do with the longitude of the asymptomatic period.

So that if people within a short period, within three years, and I say three years, it could be within five years, are on the medication and not having exacerbations of their disease, the statistical chance of them going for long periods with no disabilities is very high.

If on the other hand they start having exacerbations within a short period of time, within a three to five-year time period, then some of those persons are reclassified as having progressive relapsing disease, which

92 1 Lichtenstein 2. occurs in about 25 percent, and those persons 3 have a much poorer prognosis. 4 Is there any indication in Mr. 5 Umanzor's file that he had progressive relapsing 6 disease? 7 A No. 8 I'm going to ask my guestion 9 again. 10 Did Harrison's Internal Medicine 11 indicate an amount of years that should pass 12 during which someone was asymptomatic in order 13 to make a prognosis about their long-term future 14 with the disease? 15 MR. LOCKINGER: Objection. 16 You can answer. It either did or did not. 17 0 18 It did not. Α 19 How about the American Journal of 0 20 Radiology, the website that you went to, did it 21 prescribe a number of years that you needed to 2.2 wait? 23 MR. LOCKINGER: Objection. 24 Α The American Journal of Radiology

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web search was about the lesions and possible

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1 Lichtenstein 2. prognostic factors. 3 Okay. But it didn't prescribe a 4 number of years that you should wait? 5 It did not. Α 6 How about the clinical neurology 7 resource concerning MS trends, did it indicate a 8 number of years that needed to pass where 9 someone was asymptomatic? 10 Α No. 11 How about during your 12 conversation with the neurologist, do you recall 13 a specific conversation with the department's 14 neurologist related to Mr. Umanzor? 15 No, I do not. 16 As you sit here today, you are 17 not sure whether you went to the neurologist to 18 have a discussion? 19 A I know we have been having a lot 20 of conversations about MS as an issue, because 21 we are in transition on how we evaluate these 2.2. patients. 23 I'm just asking, and you have

testified to that and I understand, but I'm

asking about as part of the review process, you

2.4

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1	Lichtenstein	<i>J</i> 1
2	placed Mr. Umanzor's file under review, right?	
3	A Yes.	
4	Q And as part of that process, did	
5	you go to the department neurologist and have a	
6	discussion about Mr. Umanzor's file?	
7	A I can't recall exactly, so I will	
8	say no.	
9	Q What does the review process	
10	entail?	
11	MR. LOCKINGER: Objection.	
12	You can answer.	
13	A Generally speaking, after I've	
14	disqualified somebody, they can request a	
15	review, and at which point it's their	
16	responsibility to submit new medical data and at	
17	one point I will review that medical data and if	
18	I have found that there is convincing medical	
19	evidence, then I will qualify that person, or if	
20	I still have questions, then I will either refer	
21	it to a department specialist or I'll refer it	
22	to the chief surgeon.	
23	Q Did Mr. Umanzor request that his	
24	file be reviewed?	
25	MR. LOCKINGER: Objection.	

1	Lichtenstein	95
2	You can answer.	
3	A There is a vague quality to his	
4	application, because it's not police officer,	
5	and I know there is an orderly transition for	
6	review with police officer candidates.	
7	I'm not sure about cadets.	
8	Q Are you sure that his file was	
9	placed under review?	
10	MR. LOCKINGER: Objection.	
11	A I don't know.	
12	Q But earlier you testified that it	
13	was, on numerous occasions.	
14	So let's make the record clear.	
15	You don't know?	
16	A I don't know. I don't know. I	
17	misspoke.	
18	Q And you don't have any	
19	recollection of discussing Mr. Umanzor's file	
20	with the neurologist.	
21	Do you recall discussing Mr.	
22	Umanzor's file with the chief surgeon?	
23	MR. LOCKINGER: Objection.	
24	You can answer.	
25	Q I'm not talking about in general,	
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Τ	Lichtenstein
2	I'm talking about did you take Mr. Umanzor's
3	file to the chief surgeon and say, "I want to
4	talk about this case"?
5	A No.
6	Q And did you seek any new evidence
7	related to the evaluation of Mr. Umanzor's file?
8	MR. LOCKINGER: Objection.
9	You can answer, if you
10	can.
11	A I did some medical research on my
12	own to see if there were any new findings in his
13	favor, and I did not.
14	Q Did you ask him for any
15	additional documentation?
16	A No.
17	Q Did you seek any additional
18	documentation from his doctors?
19	A No.
20	Q You identified three types of
21	employment.
22	Can you tell me about the second
23	one. You've talked extensively about your role
24	at the department.
25	Can you tell me about the second

97 1 Lichtenstein 2. category of employment? I am a medical instructor and an 3 4 associate professor in medicine for a few 5 osteopathic medical schools. 6 I'm not an osteopath, but I am 7 employed as a medical trainer and I have a 8 part-time position at St. John's Hospital in Far 9 Rockaway to teach internal medicine to the 10 osteopathic residents there. 11 What's osteopathology? I don't 12 know, I'm just asking. 13 I have no clue either. 14 And this is an osteopathic 15 program and you are a medical trainer at the 16 program? 17 Α Correct. 18 And what type of training do you 19 provide? 20 I run morning report, which is 21 one to two hours where all the cases that were 2.2 admitted the night before are discussed, and I 2.3 lecture on each medical case and provide advice 2.4 on how to proceed with those cases. 25 And is there, so are these cases

98 Lichtenstein 1 2. that come into the hospital? 3 Α Yes. 4 So it's a teaching hospital? 0 5 Α Yes. 6 And are you assigned to specific 7 kinds of cases or do you evaluate any case? 8 Α Any case. 9 And are you part of a team that 10 is evaluating individuals, or are you --11 I'm an independent contractor. A 12 0 And what's the third job? 13 Α I am the director of medicine at 14 an HMO in Long Island called Age Well. 15 Q What does that job entail? 16 Α I oversee medical necessity and I 17 write policy. 18 It's a startup company. It's 19 been in business for two or three years. 20 Do you have office hours? 21 Α Yes. 2.2 So there is the Police 23 Department, there is the St. John's teaching 2.4 hospital and there is Age Well. 25 Do you have a fourth job?

99 Lichtenstein 1 2 I'm in the process of retiring Α 3 from my medical practice. 4 Are you still seeing patients? 5 Yes, but that's going to end in 6 another week or two. 7 Do you have an office? Α 8 Yes. 9 When is the last time you saw a 10 patient? 11 A week ago. 12 When do you plan on shutting your 13 office down? 14 MR. LOCKINGER: Objection. 15 You can answer, if you 16 can. Hopefully this Thursday. 17 Α 18 Why have you decided to retire 19 from your medical practice? 20 MR. LOCKINGER: Objection. 21 Answer if you can. 22 Α It's financially very difficult 23 to run a medical practice today, especially as a 2.4 solo practitioner. 25 And you are a solo practitioner?

1		Lichtenstein	100
2	A Y	es.	
3	Q I	s there any other reason other	
4	than economics w	hy you decided to retire at this	
5	time from your m	edical practice?	
6		MR. LOCKINGER: Objection.	
7		You can answer.	
8	A P	urely economics.	
9	Q Y	ou are in good standing with the	
10	medical licensin	g authority?	
11	А У	es.	
12	Q H	ave you ever been disciplined	
13	with respect to	your medical license?	
14		MR. LOCKINGER: Objection.	
15		You can answer.	
16	A N	O.	
17	Q I	'm handing you what has been	
18	marked as Plaint	iff's Exhibit 1.	
19	Р	lease take a look at it	
20	(handing).		
21	Α (Perusing document.) Okay.	
22	Q D	o you recognize this?	
23	A N	0.	
24	Q I	s that your name?	
25	A Y	es.	

101 Lichtenstein 1 2. MR. HARMAN: And for the 3 record, this is a one-page 4 document. It's a printout from a 5 website. 6 Is this your work address, 12105 7 Rockaway Beach Boulevard, is that one of your 8 work addresses? 9 That was an old office address 10 from I believe ten years ago. 11 And drawing your attention down 12 to this text that begins, "He runs a horrible 13 practice." 14 Have you ever read that before? 15 Α No. 16 And you are not familiar with 17 this website? 18 A No. 19 And I'm handing you what has been 20 marked as Plaintiff's Exhibit 2. Please take a look at it 21 2.2 (handing). 23 (Perusing document.) Okay. Α 2.4 Do you recognize this? Q 25 Α No.

102 Lichtenstein 1 2. Is that your name? 0 3 Yes. Α 4 Is that your picture? Q 5 No. Α 6 That's not you? That's not me. 7 Α 8 Drawing your attention down to 0 9 where it says, "Dr. Lichtenstein's experience," 10 do you recognize any of those as being those 11 that you are experienced in -- withdrawn. 12 Have you ever officed at 431 13 Beach 129th Street? 14 That's my current office address. 15 0 That's your current office 16 address, but this is not a picture of you? 17 A Correct. 18 Do you recognize this person? 0 19 Α No. 20 Did you ever make the statement, "I care about philosophy"? 21 2.2 I can't answer that question. Α 23 MR. LOCKINGER: Objection. 2.4 Is your specialty internal Q 25 medicine?

103 Lichtenstein 1 2. A Yes. 3 Do you treat abdominal pain? 0 4 Α Yes. 5 Anemia? 0 6 Yes. Α 7 I'm handing you what has been 8 marked as Plaintiff's Exhibit 3 (handing). Please take a look at it. 10 (Perusing document.) Isn't it 11 the same thing? 12 It's not, actually. Take a 13 moment to look at it and I have some quick 14 questions about it. 15 (Perusing document.) 16 If you take a look at Page 1, 17 beginning with procedures, and then move on to 18 conditions on the second page, and I'll have a 19 couple of questions. 20 (Perusing document.) Okay. 21 First of all, do you recognize 2.2 this as, this document, not the actual document, 23 but do you know what this was printed from? 2.4 MR. LOCKINGER: Objection. 25 You can answer, if you

1		Lichtenstein	104
2		can.	
3	A	No.	
4	Q	And drawing your attention down	
5	to the section	that begins "Procedures."	
6		Have you had an opportunity to	
7	review those p	rocedures?	
8	A	Just now.	
9	Q	And are those procedures that you	
10	perform?		
11	A	No.	
12	Q	So this is not accurate?	
13	A	Correct.	
14	Q	And how about the second page	
15	where it says,	"Conditions," do you see that	
16	there?		
17	A	(Perusing document.) Yes.	
18	Q	Are those conditions you treat?	
19		MR. LOCKINGER: Objection.	
20		You can answer.	
21	А	I can answer your question.	
22	Q	Sure. I'm just asking if you	
23	treat these cor	nditions?	
24	А	I believe because there is a	
25	gastroenterolog	gist across the hallway that they	
		MCM DEDODTING CEDVICE	

105 1 Lichtenstein 2. have mixed up our two practices, because these 3 are all, all of these diagnoses, they are all 4 associated with things that a gastroenterologist 5 would treat. 6 So this is not accurate? 7 Α Correct. 8 Did you go to, did you go to the 9 City University of New York? 10 Α No. 11 Did you go to Harvard? 0 12 Α No. 13 So it's clearly not accurate. 14 I'm handing you what has been 15 marked as Plaintiff's Exhibit 4 (handing). 16 Please take a look at it. 17 Α (Perusing document.) Okay. 18 Do you recognize this document? 0 19 Yes. Α 20 What is it? 21 I mean, I don't recognize it. Α 2.2 I'm looking at it. 23 Do you know what Health Grove is? 2.4 Α No. 25 Is that your name? Q

4			106
1		Lichtenstein	
2	А	Yes.	
3	Q	And you office at 431 Beach 129th	
4	Street?		
5	A	That's my address.	
6	Q	And is your phone number	
7	(718)318-34343		
8	А	Yes.	
9	Q	And have you had 31 years of	
10	experience in	the medical profession?	
11	А	Yes.	
12	Q	And is your primary specialty	
13	internal medic	cine?	
14	А	Yes.	
15	Q	And did you go to Icahn School of	
16	Medicine?		
17		Where did you go to medical	
18	school?		
19	А	I initially started medical	
20	school in Mexi	co and I transferred to Mount	
21	Sinai for my l	ast two years.	
22	Q	Where in Mexico?	
23	А	Tampico.	
24	Q	Why did you leave the school in	
25	Mexico and com	ne to the United States?	

107 Lichtenstein 1 2. MR. LOCKINGER: Objection. 3 You can answer, if you 4 can. 5 Because I did like way better on 6 my test scores. Is that why you went to, started 7 medical school in Mexico because of your test 8 9 scores? 10 Yes. 11 Did you get into medical school 12 in the United States? 13 Α Yes. 14 Why didn't you attend that 15 medical school? 16 No, I mean I got in --17 Before you went to medical school 18 in Mexico, did you get into a medical school in 19 the United States? 20 Α No. There's some data over there. It 21 22 says, "Dr. Lichtenstein billed Medicare a total 23 of \$391,000." 2.4 Do you see that there on the 25 second page?

108 Lichtenstein 1 2. (Perusing document.) Yes. Α 3 Does that data appear to be \bigcirc 4 accurate? 5 MR. LOCKINGER: Objection. 6 Answer if you can. I don't know. 7 Α 8 I asked you earlier about whether 0 9 Mr. Umanzor was entitled to appeal your decision 10 and you said you didn't know. 11 Do you really not know whether he 12 is entitled to appeal your decision? 13 MR. LOCKINGER: Objection. 14 Α I believe he is. I don't know 15 for certain. 16 What leads you to believe, what 17 prevents you from being certain? 18 MR. LOCKINGER: Objection. 19 A I'm more knowledgeable about the 20 appeals process with police officers. 21 I really haven't disqualified 2.2 that many cadets to know exactly what the 23 appeals process is. 2.4 Are you confident that a 25 candidate or an applicant to the department

109 1 Lichtenstein 2. would have the opportunity to appeal an adverse 3 decision that you made disqualifying them from 4 being a police officer? 5 MR. LOCKINGER: Objection. 6 You can answer. 7 Α Yes. And is that written down in 8 0 policies and procedures somewhere? 9 10 MR. LOCKINGER: Objection. 11 You can answer, if you 12 can. 13 Α I believe so. 14 And are there separate policies 15 and procedures for the cadet program? 16 MR. LOCKINGER: Objection. 17 You can answer, if you 18 can. 19 Α That's why I say I don't know. 20 don't know. 21 I assume it's the same, but it 2.2 could be different. 23 And you testified earlier that 2.4 you were the ultimate authority on the decision 25 to disqualify someone from the cadet program,

110 Lichtenstein 1 2. correct? 3 MR. LOCKINGER: Objection. 4 You can answer. 5 Α Yes. 6 I'm handing you what has been marked as Plaintiff's Exhibit 5 (handing). 7 Please take a look at it. 8 9 (Perusing document.) Okay. Α 10 Do you recognize this document? Q 11 Α No. 12 But that's your address? Q 13 Α Yes. 14 And the affiliation is accurate, 0 15 St. John's? Well, they left out Lenox Hill 16 Α 17 Hospital. 18 So you're affiliated with Lenox 19 Hill and St. John's? 20 Α Yes. 21 Are you affiliated with any other 2.2 hospital? 23 Not any longer. 2.4 I'm handing you what has been 25 marked as Plaintiff's Exhibit 6 (handing).

111 Lichtenstein 1 2. Please take a look at it. 3 Α (Perusing document.) Okay. 4 Do you recognize this document? 0 5 I don't think I have actually Α 6 seen this document. 7 0 Okay. 8 Have you ever read a complaint in 9 a lawsuit before? 10 MR. LOCKINGER: Objection. 11 Α Yes. 12 So you know what they look like? Q 13 Α Yes. 14 Did you read the complaint in the 15 matters that you were a defendant in, the 16 malpractice claims? 17 MR. LOCKINGER: Objection. 18 Answer if you can. 19 Α Yes. 20 But you didn't read this 21 complaint? 2.2 I don't believe I have seen this 23 document (indicating). 2.4 I'm handing you what has been 25 marked as Plaintiff's 7 (handing).

112 1 Lichtenstein 2. Please take a look at it. 3 Α (Perusing document.) Okay. 4 Do you recognize this document? Q 5 Yes. Α 6 What is it? 7 Α It's one of the malpractice cases that I referenced before. 8 9 And in the caption at the top of 10 the page where it says, "David Lichtenstein, 11 M.D., and David Lichtenstein, Physician, PC, " is 12 that you and your entity? 13 Α Yes. 14 And are you the sole owner of 15 David Lichtenstein Physician, PC? 16 Α Yes. 17 And is that still an active 18 corporation in the State of New York? 19 A Yes. 20 And right there at the bottom it says, "David Lichtenstein, MD, defendant, pro 21 2.2 se." 23 Did you eventually obtain 2.4 attorneys in this case? 25 A Yes.

113 Lichtenstein 1 2. Do you know who your attorneys 0 were for this matter? 3 4 They were assigned by the 5 malpractice company. 6 And that's the same malpractice carrier that you referred to earlier? 7 8 In this case, yes. 9 I'm handing you what has been 10 marked as Plaintiff's Exhibit 8 (handing). 11 Please take a look at it. 12 Α (Perusing document.) 13 Do you recognize this document? 14 MR. LOCKINGER: Objection. 15 Answer if you can. 16 I don't recall this document. Α 17 0 Do you know who Sanford 18 Lindenbaum is? 19 MR. LOCKINGER: Objection. 20 Answer if you can. 21 Α No. 2.2 Turn your attention, if your Q 23 will, to the second to the last page. 2.4 (Perusing document.) Okay. Α 25 Q Do you see where it says, "Yours MCM REPORTING SERVICE

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1	Lichtenstein	114
2	et cetera"?	
3	A Yes.	
4	Q And do you see a name below that	
5	in bold, I mean in all caps?	
6	A Yes.	
7	Q Do you recognize any of those	
8	names?	
9	A (Perusing document.) It appears	
10	that one of them was my attorney for this	
11	action.	
12	Q Who was your attorney for this	
13	action?	
14	A It says Sanford R. Lindenbaum.	
15	Q And do you have any reason to	
16	believe that he was not your attorney for this	
17	action?	
18	A I assume he was.	
19	Q Other than being your attorney	
20	for this action, do you have any other	
21	relationship with Mr. Lindenbaum?	
22	A No.	
23	Q And he was chosen by your	
24	malpractice carrier?	
25	A Yes.	

115 1 Lichtenstein 2 I'm handing you Plaintiff's 0 3 Exhibit 9 (handing). 4 Please take a look at it. 5 (Perusing document.) Okay. Α 6 Do you recognize this document? 7 MR. LOCKINGER: Objection. 8 Answer if you can. 9 No. Α 10 Drawing your attention down to 11 Paragraph 3, No. 3, could you please read that 12 paragraph? You don't have to read it out loud. 13 Just read it to yourself. 14 Α Okay. 15 Q It goes on to the next page. 16 (Perusing document.) Α 17 0 Taking a step back, tell me when 18 you're ready. I'm ready. 19 A 20 The plaintiffs in this case are Robert London and Ann London. 21 22 Is that you as the defendant? 23 Yes. A 2.4 And is that your entity? Q 25 Α Yes.

116 Lichtenstein 1 2. And having read Paragraph 3 in 0 this document entitled "Verified Bill Of 3 4 Particulars, " do you have any reason to believe 5 that does not describe the claims that were 6 brought against you in the London matter? 7 MR. LOCKINGER: Objection. You can answer. 8 9 No. Α 10 I'm handing you Plaintiff's 0 11 Exhibit 10 (handing). Please take a look at it. 12 13 Α (Perusing document.) Okay. 14 This also involves the London 15 matter, but it's an amended document. 16 Do you know why the bill of 17 particulars was amended in this case? 18 MR. LOCKINGER: Objection. 19 You can answer. 20 Α I don't remember. 21 If you'd just take the time to 2.2 read Paragraph 3 again. 23 (Perusing document.) Okay. 2.4 Do you have any reason to believe 25 that this still doesn't accurately reflect the

117 1 Lichtenstein 2. claims that were brought against you by the 3 London plaintiffs? 4 MR. LOCKINGER: Objection. 5 You can answer. 6 A This reflects accurately the 7 claims. 8 And drawing your attention to the 0 9 second page, seven lines down, would you agree 10 that one of the allegations that the Londons 11 made against you was you failed to properly take 12 and/or document the patient's history. 13 Would you agree with that? 14 Α Yes. 15 0 And that you failed to take heed 16 of and appreciate the significance of the patient's history? 17 18 A Yes. 19 Would you agree that that's what 0 20 it says? 21 Α Yes. 2.2 And a few more lines down, would 23 you also agree that it says that you failed to 2.4 take heed of and appreciate the significance of 25 the patient's signs and symptoms or signs,

118 1 Lichtenstein 2. symptoms? 3 MR. LOCKINGER: Objection. 4 Α Yes. 5 And having read the rest of this Q 6 paragraph, do you see anything in here that you 7 don't recognize as the claims that were brought 8 against you by the Londons? 9 MR. LOCKINGER: Objection. 10 You can answer, if you 11 can. 12 Α No, it appears accurate. 13 And was the London matter 14 resolved? 15 It was settled. Α 16 And did you make a cash payment 17 as part of the settlement? 18 Α Yes. 19 And were you, did anyone else 20 contribute to the pool of money that was paid as 21 part of the London matter? 2.2 MR. LOCKINGER: Objection. 23 Answer if you can. 2.4 Α No. 25 Q You were the only person that MCM REPORTING SERVICE

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119 Lichtenstein 1 2. paid. The insurance carrier didn't 3 4 contribute any money to the settlement? 5 No, they paid the settlement. Α 6 They paid the settlement. 7 I'm handing you what has been marked as Plaintiff's Exhibit 11 (handing). 8 9 Please take a look at it. 10 (Perusing document.) Okay. Α 11 Do you recognize this document? Q 12 Α Yes. 13 What is it? 14 It is a relatively new quideline 15 from New York State for the assessment of the 16 fitness standards for peace officers. 17 Does this document apply to 18 cadets? 19 MR. LOCKINGER: Objection. 20 You can answer, if you 21 can. 2.2 Α Yes. Well, that's not true. 23 No, it does not. 2.4 It doesn't? Q 25 Α It does not.

120 1 Lichtenstein 2. And what is the basis of your 0 3 testimony? 4 MR. LOCKINGER: Objection. 5 You can answer, if you 6 can. 7 Α When we hire cadets, we're only 8 entering into a contract that we're -- with a 9 cadet, they're going to provide a service for us 10 and we are going to give them a financial 11 benefit of some sort, and at some point they 12 agree to become police officers. 13 So it's your testimony that these 14 are standards that are applied to people who are 15 actually applying to become police officers as 16 opposed to people who are applying to become 17 cadets? 18 MR. LOCKINGER: Objection. 19 Technically, that's correct. Α 20 And you testified that this 21 document that is entitled, "Medical and Physical 2.2 Fitness Standards and Procedures For Police 23 Officer Candidate," is a relatively new 2.4 document? 25 Α Yes.

121 Lichtenstein 1 2. What does that mean? 0 3 That means that there are certain 4 areas of the document that are relatively new, 5 especially in the neurological section, there is 6 a guideline that if someone with seizure 7 disorders is asymptomatic for one year, that 8 they should be considered for employment. 9 The older evaluations were two to 10 three years. 11 And I draw your attention down to 12 the second page. 13 (Perusing document.) 14 Do you see there where it says at 15 the very bottom, it says, "Version 2011?" No, 16 the second page, the first page is the title 17 page. 18 That page right there. 19 So you see there it says, 20 "Version 2011, 9/14/2011"? 21 Yes. Α 2.2 Is it still your testimony that 2.3 this document has been updated recently? 2.4 I'll testify that this document,

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that I have not reviewed this document.

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122 Lichtenstein 1 2. The first time that I have seen 3 this document was about three years ago. 4 When was the last time you saw 5 it? 6 Well, it's up on my bulletin Α board in my office. 7 8 0 Okay. 9 But when was the last time you 10 looked at it? 11 MR. HARMAN: I'm going to 12 call for the production of the 13 version that is on the witness' 14 bulletin board in his office. The last time I looked at it was 15 Α 16 last week. 17 So you regularly go to the one 18 that's on the bulletin board in your office? 19 A Yes. 20 And do you know what the date is on that version? 21 2.2 Α I've never checked. 23 When is the last time, when do 24 you recall getting that version, three years 25 ago?

123 Lichtenstein 1 2. Yes, roughly three years ago. Α 3 I can clear this up if you would 4 like me to. 5 Sure. 0 6 We have our own title 7 requirements with recommendations for job 8 evaluations that are purely generated by the 9 department. These are generated by the state. 10 And up until recently, and I say 11 "recently," within three to five years, we 12 pretty much went by our own guidelines. 13 Recently we have been directed to 14 go by New York State. So even though this 15 document may be an older document, I didn't 16 review it until the last three years. 17 And this document says that if 18 you have been asymptomatic for a year, that you should be qualified? 19 20 You should be considered for 21 qualification for a seizure disorder, which was 2.2 a new thing to me. 23 I thought, you know, that it was

at least two or three years.

Q And does it say anything about

2.4

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124 Lichtenstein 1 2. MS? MS is listed as one of the 3 4 progressive neurological diseases that should be 5 considered for disqualification, but there is, 6 there is a qualifying remark that all disorders need to be individually assessed. 7 8 And is there a time period by 9 which an individual who has been diagnosed with 10 MS should be asymptomatic before they can be 11 qualified under these standards? 12 No, it's left pretty vague. 13 It's left vaque. 14 But you have been directed to 15 follow these standards? 16 MR. LOCKINGER: Objection. 17 Answer if you can. 18 No, we have not been directed to Α 19 follow the standards. But in terms of --20 Why then do you review the standards? 21 2.2 MR. LOCKINGER: Objection. 2.3 You can answer, if you 2.4 can. 25 As I said before, and I'll say Α MCM REPORTING SERVICE

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now, our evaluation for chronic medical disorders is going through a transition period, and there's very few cohesive source documents for police officer eligibility with medical disorders.

In other words, there has been no specific medical studies done in each one of these medical issues. Most of them have been decided by court cases.

So for -- so years ago if you were a type one diabetic, you would be disqualified, but because of court cases and the fact that there is no good medical evidence to show that type one diabetes will prevent someone from doing the job today, that we have reassessed those persons and now it is no longer an automatic disqualification.

And it's the same thing with MS.

Q Have you ever been disciplined at the police department?

MR. LOCKINGER: Objection.

A No.

Q Have you ever received any negative feedback for qualifying someone who was

126

Lichtenstein

later determined to be, to have, to be suffering an event in their life that would otherwise disqualify them?

MR. LOCKINGER: Objection.

Q And if you don't understand my question, I'm happy to rephrase it. It was a complicated question.

A I understand and I'll answer it.

Q Okay.

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A There have been times where I will review a borderline orthopedic issue and that candidate was either a member of the armed forces or they are in another police department and I would qualify those persons and then within a short period of time that underlying orthopedic disorder had come up and caused them to become disabled.

So I'm not disciplined on those things, but it is an area for self review.

Q And how about with respect to neurological conditions, has that ever come up where it has been brought to your attention that someone became disabled within a relatively short amount of time after you qualified them?

127 Lichtenstein 1 2. To my knowledge, no. A 3 Were there any signs in Mr. 4 Umanzor's file that he could become disabled in 5 the near future? 6 As I've already stated, and the 7 reason for my disqualification for this candidate was that I did not feel comfortable 8 9 with the short period of time between his 10 diagnosis and his application. 11 I'm just asking if there was 12 anything in his file that indicated that he was 13 on the verge of becoming disabled? 14 MR. LOCKINGER: Objection. 15 You can answer. 16 Α Yes and no. 17 Well, what was in his file that 18 indicated to you that he was on the verge of becoming disabled? 19 20 MR. LOCKINGER: Objection. 21 You can answer, if you 2.2 can. 23 His MRI report listed that he had 2.4 a large parietal lesion and that he also had 25 secondary uptake in his cervical spine.

Lichtenstein

And there is an old, old, which has been disproved, notion of something called plaque load initially with MS persons, that the higher your plaque load, the more likely you are to not do well with the disease.

But there are some, and that was the radiological journal that I had reviewed, that a soft, poor clinical indicator is uptake in the cervical spine, but that was a minor part of my decision making.

Q You have mentioned some of the data that was in his medical file.

A Yes.

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2.2

2.4

Q But my question to you was what in his medical file led you to believe that he was on the verge of becoming disabled?

So is there anything specific in his file, you said yes and no, and I asked you what was the yes part and I'm still not clear because you just told me what was in his file.

Why don't you tell me what indicated to you with specificity that he was on the verge of becoming disabled?

MR. LOCKINGER: Objection.

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129 Lichtenstein 1 2. You can answer. 3 The yes part was that not enough 4 time period had gone by since his initial 5 diagnosis. 6 And that indicated to you that he 7 was on the verge of becoming disabled? 8 Yes. Α 9 And the medical and physical 10 fitness standards, did you go to them as part of 11 your evaluation of Mr. Umanzor's file? 12 MR. LOCKINGER: Objection. 13 You can answer. 14 Not in this case. Α 15 0 You have testified that you don't 16 use e-mail as part of your work 17 responsibilities. 18 Do you take notes? 19 Α If I write any note, it's on the 20 candidate's application form. 21 Do you generate memoranda? 2.2 MR. LOCKINGER: Objection. 2.3 You can answer. 2.4 No, no, there is a formal --25 there's a formal document that needs to be

130 1 Lichtenstein 2. generated. 3 There is no memoranda. 4 So other than taking notes in a 0 5 file --6 In the applicant's file. In the applicant's file, do you 7 8 do any other kinds of writing? 9 MR. LOCKINGER: Objection. 10 You can answer. 11 I will write an opinion for 12 certain -- for -- to answer certain medical 13 answers that arise within the department, but not as it applies to candidates. 14 15 Q When is the last time you wrote 16 an opinion? 17 MR. LOCKINGER: Objection. 18 You can answer. 19 A The last time was right after 20 9/11, there was a question about the incidence 21 of sarcoid and I was asked to see if there was 2.2 an abnormal rise in sarcoid in New York City 23 post 9/11 exposure in the Police Department 2.4 versus the civilian population. 25 Have you ever written an opinion

132 Lichtenstein 1 2. Α I refer them for treatment. 3 But you diagnose before you \bigcirc 4 refer? 5 Correct. Α 6 And how many times in the last year have you diagnosed someone with MS? 7 8 In the last year? 9 Yes. 10 I would say three people in the Α 11 last five years. 12 It's not a very common diagnosis. 13 0 Three people in the last five years? 14 15 Α Yes. 16 And did you send them for second 17 opinions? I sent them for treatment. 18 19 Who did you send, to whom did you 20 send them for treatment? 21 There are area neurologists and 2.2 there's an MS specialist at NYU that I use. 2.3 What's his name? I don't remember. 2.4 I send the tougher cases to him. 25 The problem with MS, and there is

133 1 Lichtenstein 2. no definitive diagnostic test for MS. MRIs are 3 helpful, lumbar spine fluid analysis is helpful, 4 but the technical diagnosis for MS is 5 fluctuating neurological changes through time. 6 There is no exact medical test. 7 So a lot of times you have to 8 infer MS, and that can lead in a delay of 9 diagnosis. 10 Do you believe it's -- have you 11 ever prescribed someone medication for MS? I don't believe that's 12 A 13 appropriate. 14 I do treat acute exacerbations of 15 MS with IV steroids in the hospital. 16 But I'm talking about in your 17 private practice? 18 A No. 19 So you believe it's in the 20 patient's best interest to refer them to a 21 specialist for treatment? 2.2 Α Yes. 2.3 And you don't prescribe medicine? 2.4 Α Only on an emergency basis, and 25 that's only for an acute flareup of MS.

134 Lichtenstein 1 2. And is that because a specialist 3 is more qualified to assess the patient's needs? 4 MR. LOCKINGER: Objection. 5 You can answer, if you 6 can. 7 Α That's part of it. 8 The other part of it is, most, 9 MS drug therapy is very expensive, and most 10 medical insurances wouldn't consider paying for 11 it unless it was being referred by a specialist. 12 I'm handing you what has been 13 marked as Plaintiff's 12 (handing). 14 Please take a look at it. 15 Α (Perusing document.) Okay. 16 Do you recognize this? 0 17 Α I recognize the second page. 18 What about the second page do you 0 19 recognize? 20 Α That was the medical clearance letter from the candidate's doctor. 21 2.2 And you would agree that it Q 23 clears Mr. Umanzor for service as an NYPD cadet? 2.4 MR. LOCKINGER: Objection. 25 You can answer.

135 Lichtenstein 1 2. For the most part, yes. Α 3 I was slightly concerned about, 4 there was a reference to some residual 5 neurological changes in, you know, a mild 6 sensory loss in the fingers of the hand, but when I had gone through his physical exam, that 7 8 was not mentioned, so I didn't know if that was 9 an error or whether it was just not significant 10 in his medical issues. 11 But did you ever ask for any 12 additional information? 13 Α No. I compared the letter to his physical exam that the doctor sent and I was 14 15 satisfied that this letter qualified, but was 16 qualified. 17 0 You relied on the physical exam? 18 Α Yes. 19 And the physical exam didn't 20 indicate any mild sensory loss? 21 Correct. Α 2.2 I'm handing you what has been Q 2.3 marked as Plaintiff's Exhibit 13 (handing).

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Please take a look at it.

(Perusing document.) Okay.

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1		Lichtenstein	100
2	Q Do	you recognize this	
3		MR. HARMAN: For the	
4	re	cord, this is a series of	
5	do	cuments Bates stamped D00019	
6	th.	rough D00021.	
7	Q Do	you recognize this series of	
8	documents?		
9	A I	remember looking at them.	
10	Q So	did you review these documents	
11	to make your dete	rmination related to Mr.	
12	Umanzor's disqualification from the cadet		
13	program?		
14		MR. LOCKINGER: Objection.	
15		You can answer.	
16	A Ye	S.	
17	Q I'1	m handing you what has been	
18	marked as Plainti	ff's Exhibit 14 (handing).	
19	Plo	ease take a look at it.	
20	A (Pe	erusing document.) Okay.	
21	Q Wa	s Mr. Umanzor taking	
22	medication?		
23	A Ye	S.	
24	Q An	d do you know what medication	
25	he was taking?		

137 1 Lichtenstein 2. He was taking one of the A 3 immunomodulators, he was taking Tecfidera on 4 7/24/13 and he was having some slight reaction 5 to it, but that didn't concern me. 6 To what extent does medication prevent relapse? 7 8 The newer immunomodulators have 9 been found to be very effective, which is why we 10 are altering our evaluation of MS patients. 11 In the past the medications were 12 not that effective. 13 Nowadays with his type of 14 relapsing/remitting and no symptoms over a 15 period of time, he should do very well and be 16 asymptomatic for decades. 17 I'm handing you what has been 18 marked as Plaintiff's Exhibit 15 (handing). 19 Please take a look at it. 20 (Perusing document.) Okay. Α 21 MR. HARMAN: For the 2.2 record, this is D000026 through 23 27. 2.4 Q Do you recognize these documents? 25 Α Yes.

138 1 Lichtenstein 2. Were they part of the collection 0 3 of documents that you reviewed related to your 4 disqualification of Mr. Umanzor? 5 MR. LOCKINGER: Objection. 6 You can answer. 7 Α Yes. MR. HARMAN: I don't think 8 I have any more questions, but if 10 we could just take about five 11 minutes, but I think we're just 12 about done. 13 I am, however, 14 technically, going to leave your 15 deposition open. We have made a 16 variety of different requests on 17 the record and we'll follow up in 18 a writing with more detailed 19 requests, but you can take that 20 up with your lawyer. 21 Give me five minutes, 2.2 please? 23 MR. LOCKINGER: Yes. 2.4 I have a couple on 25 redirect.

139 Lichtenstein 1 2. Just literally two. 3 MR. HARMAN: Let me 4 confirm that I'm done and then 5 you can do redirect. 6 MR. LOCKINGER: Sure. 7 (Whereupon, at 1:41 p.m., a recess was taken.) (Whereupon, at 1:50 p.m., 10 the deposition resumed with all 11 parties present.) 12 MR. HARMAN: I have a few 13 more followup questions and I 14 will give you your opportunity to 15 ask questions. 16 BY MR. HARMAN: 17 Do you know when Mr. Umanzor was 18 diagnosed with MS? 19 I would have to refer back to his A 20 record. I remember when I reviewed it the 21 2.2 time period of his diagnosis and treatment and 23 his application period was less than a year. 2.4 It was? 0 25 I believe so, yes.

Lichtenstein

O The difference between --

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A From when he got his last treatment, because at first he was treated with IV steroids, I think, for his acute issue, I know he had two attacks and one of them he was treated acutely and appropriately with IV steroids.

And then as it became stable, he was put on maintenance therapy. And, once again, I would have to reference the file itself, but from the time he was, I would say from the time he was placed on his maintenance therapy to his application period was less than one year.

Q Do you know if he was diagnosed before or after the attacks?

A I assume with his age and his presentation that they would make the diagnosis right away, but I can't say.

Q So you believe it was sometime after the attacks?

A I believe he had his attack, and because of his symptoms he was, they made an immediate diagnosis, I would assume.

141 Lichtenstein 1 2. I never really checked. 3 And you were basing your 4 determination to disqualify him based on the 5 period between his last attack and his 6 application? 7 MR. LOCKINGER: Objection. 8 You can answer. 9 Yes. Yes. Α 10 I'm going to hand you, again, 11 Plaintiff's Exhibit 12 and ask you to turn to 12 the second page (handing). 13 (Perusing document.) Okay. 14 Do you see where it says --15 what's the date of this letter? 16 It's dated April 15, 2014. And then what does the first 17 0 18 sentence say? 19 A "To whom it may concern: 20 "Mr. Umanzor is a patient under 21 my care for relapsing/remitting multiple 2.2 sclerosis diagnosed in February 2013." 23 So you would agree with me that 2.4 his attacks were sometime before February 2013? 25 MR. LOCKINGER: Objection.

1		Lichtenstein	142
2	A	Yes.	
3	Q	And you would agree with me that	
4	_	his letter sometime after April	
5	15, 2014?		
6	А	Okay.	
7	Q	Yes or no?	
8	А	I don't know.	
9	Q	You don't know when you received	
10	it?		
11		Any reason to believe that you	
12	received it be	efore April 15, 2014?	
13	A	I don't remember.	
14	Q	I'm asking you if you have any	
15	reason to beli	eve that you received that this	
16	letter is misc	lated, that you somehow received it	
17	before April c	of 2014?	
18	A	I don't believe so.	
19	Q	Okay.	
20		MR. HARMAN: No further	
21		questions.	
22	EXAMINATION		
23	BY MR. LOCKING	GER:	
2 4	Q	Earlier today you discussed Randy	
25	Umanzor being	placed on medical review and then	

143 Lichtenstein 1 2. later you talked about there being a decision to 3 disqualify him and a subsequent medical review. 4 Is there -- is medical review a 5 term of art within the appeal process or within 6 the process of an application for a candidate 7 for a police officer position? I'm sorry, is it a what? 8 9 You originally placed Randy Umanzor on medical review, correct? 10 11 A Yes. 12 And then subsequently you made a 13 decision to disqualify him, correct? 14 Α Yes. 15 And after you made the decision 16 to disqualify him, was there something else available to him that was not medical review? 17 18 Yes, I believe, I believe he 19 had -- there was an appeal process. 20 So appeal and medical review are 21 two distinct things? 2.2 Α Correct. 23 You just stated --2.4 MR. LOCKINGER: Actually, 25 no further questions.

Case 1:14-cy-09850-VSB Document 58-7 Filed 04/01/16 Page 145 of 148

Case 1:14-cv-098	350-VSB Document 58-7 Filed 04/01/16 Page 146 of	148
		145
	I N D E X P A G E	
Witness	Examination By Page	
David Lic	htenstein Mr. Harman 4	
	Mr. Lockinger 142	
	EXHIBITS	
	2 de la	
1	One-page document	4
2	A three-page document	4
3	A four-page document	4
4	Health Grove document	4
5	A three-page document	4
6	Complaint	4
7	Summons	4
8	Answer	5
	MCM REPORTING SERVICE (516) 775-5209	
	Witness David Lic Plaintiff Exhibits 1 2 3	INDEX PAGE Witness Examination By Page David Lichtenstein Mr. Harman 4 Mr. Lockinger 142 EXHIBITS Plaintiff's Description Page 1 One-page document 2 A three-page document 3 A four-page document 4 Health Grove document 5 A three-page document 6 Complaint 7 Summons 8 Answer

	Case 1:14-cv-098	350-VSB Document 58-7 Filed 04/01/16 P	age 147 of 148	
1				146
2		EXHIBITS		
3	Plaintiff		D	
4	Exhibits	Description	Page	
5	9	Verified Bill of Particulars	5	
6				
7	10	Amended Verified Bill of Particulars	5	
8				
9	11	Medical and Physical Fitness Standards and Procedures for	5	
10		Police Officer Candidate		
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12	12	A document Bates stamped D000017 through D000018	5	
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14	13	A document Bates stamped D000019 through D000021	5	
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16	14	A document Bates stamped D000022 through D000024	6	
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18	15	A document Bates stamped D000026 through D000027	6	
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